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| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

## Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself  |  |   |
|-----|---|--|---|
|     |   | About Debtor 1:                          | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | Your full name  |  |   |
|     | Write the name that is on   | Oleksiy                                  | Anna  |
|     | your government-issued<br>picture identification (for<br>example, your driver's                                   | First name                               | First name                                    |
|     | license or passport).   | Middle name                              | Middle name                                   |
|     | Bring your picture  | Sichkar                                  | Mashkovich                                    |
|     | identification to your meeting with the trustee.  | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
|     |   |  |   |
| 2.  | All other names you have used in the last 8 years   |  |   |
|     | Include your married or maiden names.   |  |   |
| 3.  | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-1975                              | xxx-xx-0810                                   |

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Debtor 1 Oleksiy Sichkar Debtor 2 Anna Mashkovich

Case number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ■ I have not used any business name or EINs.  Business name(s)  EINs  |
| 5. | Where you live   | 527 Cottonwood Lane<br>Schaumburg, IL 60193   | If Debtor 2 lives at a different address:   |
|    |  | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code  |
|    |  | Cook<br>County  | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| 6. | Why you are choosing this district to file for bankruptcy  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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Debtor 2 **Anna Mashkovich** Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ■ No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Oleksiy Sichkar

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|      | tor 1<br>tor 2                 | Oleksiy Sichkar<br>Anna Mashkovich  |                        | Docum   | Case number (if known)   |
|------|--------------------------------|---|------------------------|---|--|
|      |                                |   |                        |   |  |
| Part | t 3:                           | Report About Any Bu   | sinesses               | You Own as a Sole Proprie                           | tor  |
| 12.  | of an                          | ou a sole proprietor<br>y full- or part-time<br>ness?   | ■ No.                  | Go to Part 4.                                       |  |
|      |                                |   | ☐ Yes.                 | Name and location of bus                            | siness   |
|      | busin<br>an in<br>sepa<br>as a | e proprietorship is a ess you operate as dividual, and is not a rate legal entity such corporation, ership, or LLC. |                        | Name of business, if any                            |  |
|      | If you<br>sole p               | have more than one proprietorship, use a rate sheet and attach  |                        | Number, Street, City, Sta                           | te & ZIP Code  |
|      |                                | nis petition.   |                        | Check the appropriate bo                            | ox to describe your business:  |
|      |                                |   |                        | ☐ Health Care Busi                                  | ness (as defined in 11 U.S.C. § 101(27A))  |
|      |                                |   |                        | ☐ Single Asset Rea                                  | Estate (as defined in 11 U.S.C. § 101(51B))  |
|      |                                |   |                        | ☐ Stockbroker (as o                                 | lefined in 11 U.S.C. § 101(53A))   |
|      |                                |   |                        | ☐ Commodity Broke                                   | er (as defined in 11 U.S.C. § 101(6))  |
|      |                                |   |                        | ■ None of the above                                 | e  |
| 13.  | Chap<br>Bank                   | rou filing under<br>oter 11 of the<br>cruptcy Code and are<br>a small business                                      | deadlines<br>operation | s. If you indicate that you are                     | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
|      |                                | definition of small   | ■ No.                  | I am not filing under Chap                          | oter 11.   |
|      |                                | ness debtor, see 11<br>C. § 101(51D).   | □ No.                  | I am filing under Chapter<br>Code.                  | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy   |
|      |                                |   | ☐ Yes.                 | I am filing under Chapter                           | 11 and I am a small business debtor according to the definition in the Bankruptcy Code.  |
| Part | t 4:                           | Report if You Own or  | Have Any               | Hazardous Property or An                            | y Property That Needs Immediate Attention  |
| 14.  |                                | ou own or have any  | ■ No.                  |   |  |
|      | alleg<br>of im                 | erty that poses or is<br>ed to pose a threat<br>minent and<br>ifiable hazard to                                     | ☐ Yes.                 | What is the hazard?                                 |  |
|      | publi<br>Or do<br>prop         | c health or safety? byou own any erty that needs ediate attention?  |                        | If immediate attention is needed, why is it needed? |  |
|      | peris<br>livest<br>or a l      | xample, do you own<br>hable goods, or<br>ock that must be fed,<br>building that needs<br>nt repairs?                |                        | Where is the property?                              |  |
|      | -                              |   |                        |   | Number, Street, City, State & Zip Code   |
|      |                                |   |                        |   |  |

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| Debtor 1 | Oleksiy Sichkar |                        |  |
|----------|-----------------|------------------------|--|
| Debtor 2 | Anna Mashkovich | Case number (if known) |  |

\_ ....

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-33692 Doc 1 Filed 11/09/17 Entered 11/09/17 20:33:32 Desc Main Document Page 6 of 56

|     | tor 1 Oleksiy Sichkar<br>tor 2 Anna Mashkovich                 | ı                        |   | Case n   | number (if known)   |     |
|-----|--|--------------------------|---|--|---|-----|
| Par | 6: Answer These Questi   | ions for Rep             | orting Purposes   |  |   |     |
| 16. | What kind of debts do you have?                                |                          | Are your debts primarily consundividual primarily for a personal,         |  | re defined in 11 U.S.C. § 101(8) as "incurred by  | an  |
|     |  |                          | ☐ No. Go to line 16b.   |  |   |     |
|     |  |                          | Yes. Go to line 17.   |  |   |     |
|     |  |                          | Are your debts primarily busines noney for a business or investmen        |  |   |     |
|     |  |                          | ☐ No. Go to line 16c.   |  |   |     |
|     |  |                          | ☐ Yes. Go to line 17.   |  |   |     |
|     |  | 16c. S                   | State the type of debts you owe the                                       | at are not consumer debts or bu                                | usiness debts   |     |
| 17. | Are you filing under Chapter 7?                                | □ No. I                  | am not filing under Chapter 7. Go   | to line 18.  |   |     |
|     | Do you estimate that after any exempt property is excluded and |                          | am filing under Chapter 7. Do you<br>re paid that funds will be available |  | ot property is excluded and administrative expenditors?   | ses |
|     | administrative expenses are paid that funds will               |                          | No  |  |   |     |
|     | be available for distribution to unsecured creditors?          |                          | ☑ Yes   |  |   |     |
| 18. | How many Creditors do  | <b>■</b> 1-49            |   | <b>1</b> ,000-5,000  | <b>2</b> 5,001-50,000   |     |
|     | you estimate that you owe?                                     | □ 50-99                  |   | ☐ 5001-10,000  | 50,001-100,000  |     |
|     |  | ☐ 100-199<br>☐ 200-999   |   | ☐ 10,001-25,000  | ☐ More than100,000  |     |
| 19. | How much do you  | □ \$0 - \$50             | ,000  | ☐ \$1,000,001 - \$10 million                                   | □ \$500,000,001 - \$1 billion   |     |
|     | estimate your assets to be worth?                              |                          | - \$100,000   | □ \$10,000,001 - \$50 million                                  |   |     |
|     |  |                          | 1 - \$500,000<br>1 - \$1 million  | □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million |   |     |
| 20. | How much do you  | □ \$0 - \$50             | ,000  | □ \$1,000,001 - \$10 million                                   | □ \$500,000,001 - \$1 billion   |     |
|     | estimate your liabilities to be?                               |                          | I - \$100,000<br>1 - \$500,000  | □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million   | * ,,  |     |
|     |  |                          | 1 - \$1 million   | □ \$100,000,001 - \$100 million                                |   |     |
| Par | 7: Sign Below  |                          |   |  |   |     |
| For | you  | I have exan              | nined this petition, and I declare u                                      | under penalty of perjury that the                              | e information provided is true and correct.   |     |
|     |  |                          |   |  | ligible, under Chapter 7, 11,12, or 13 of title 11, nd I choose to proceed under Chapter 7.     |     |
|     |  |                          | ey represents me and I did not pa<br>I have obtained and read the notion  |  | o is not an attorney to help me fill out this (b).  |     |
|     |  | I request re             | lief in accordance with the chapte  | er of title 11, United States Code                             | e, specified in this petition.  |     |
|     |  |                          |   |  | oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 | 19, |
|     |  | /s/ Oleksi               | -   | /s/ Anna Ma  |   | _   |
|     |  | Oleksiy S<br>Signature o |   | <b>Anna Mash</b><br>Signature of D                             |   |     |
|     |  | Executed o               | October 31, 2017 MM / DD / YYYY   | Executed on  | October 31, 2017<br>MM / DD / YYYY  | _   |

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Debtor 1 Oleksiy Sichkar

Debtor 2 Anna Mashkovich Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alexey Y. Kaplan (Kaplan Law Offices, P.C.) Date October 31, 2017 MM / DD / YYYY Signature of Attorney for Debtor Alexey Y. Kaplan (Kaplan Law Offices, P.C.) 6272494 Printed name Kaplan Law Offices, P.C. Firm name 3400 Dundee Road Suite 150 Northbrook, IL 60062 Number, Street, City, State & ZIP Code (847) 509-9800 alex@alexkaplanlegal.com Contact phone Email address 6272494

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|                        |                          | Docume            | ent Page 8 of 5 | 6 |                       |
|------------------------|--------------------------|-------------------|-----------------|---|-----------------------|
| Fill in this info      | rmation to identify your | case:             |                 |   |                       |
| Debtor 1               | Oleksiy Sichkar          |                   |                 |   |                       |
|                        | First Name               | Middle Name       | Last Name       |   |                       |
| Debtor 2               | Anna Mashkovici          | h                 |                 |   |                       |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name       |   |                       |
| United States B        | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS     |   |                       |
| Case number (if known) |                          |                   |                 |   | ☐ Check if this is an |
|                        |                          |                   |                 |   | amended filing        |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

|     |  | Your a<br>Value o | ssets<br>of what you own |
|-----|--|-------------------|--------------------------|
| 1.  | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | \$                | 385,000.00               |
|     | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$                | 76,695.00                |
|     | 1c. Copy line 63, Total of all property on Schedule A/B  | \$                | 461,695.00               |
| Paı | t 2: Summarize Your Liabilities  |                   |                          |
|     |  |                   | abilities<br>t you owe   |
| 2.  | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$                | 437,572.00               |
| 3.  | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                            | \$                | 0.00                     |
|     | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$                | 152,270.00               |
|     | Your total liabilities   | \$                | 589,842.00               |
| Pai | t 3: Summarize Your Income and Expenses  |                   |                          |
| 4.  | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$                | 5,824.00                 |
| 5.  | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J  | \$                | 5,941.00                 |
| Paı | t 4: Answer These Questions for Administrative and Statistical Records   |                   |                          |
| 6.  | Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you                     | r other scl       | hedules.                 |
|     | ■ Yes What kind of debt do you have?   |                   |                          |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Oleksiy Sichkar

Debtor 2 Anna Mashkovich Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,084.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total c | aim  |
|--|---------|------|
| From Part 4 on Schedule E/F, copy the following:   |         |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$      | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$      | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$      | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$      | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$      | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$     | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$      | 0.00 |

|                      | Cas  | e 17-3369   | 2 Doc 1                |                        | 11/09/17<br>ument                            | Entered 11/09/17   | 7 20:33:32                    | 2 Des                    | c Main   |
|----------------------|--|---|------------------------|------------------------|--|--|-------------------------------|--------------------------|--|
| Fill                 | in this informa  | tion to identify  | y your case and th     |                        |  | 1 7000. 107 (71.50)  |                               |                          |  |
| Deb                  | otor 1   | Oleksiy Sicl  |                        | Name                   |  | Last Name  |                               |                          |  |
|                      | otor 2<br>ouse, if filing)                                 | Anna Mashl<br>First Name                                      |                        | Name                   |  | Last Name  |                               |                          |  |
| Uni                  | ted States Bank  | ruptcy Court fo   | r the: NORTHER         | N DIST                 | RICT OF ILLIN                                | NOIS   |                               |                          |  |
| Cas                  | se number  |   |                        |                        |  | -  |                               |                          | Check if this is an amended filing                               |
| _                    | ficial Forr  |   | _                      |                        |  |  |                               |                          | 12/15  |
| nfor<br>Insv<br>Pari | mation. If more s<br>wer every question<br>t1: Describe Ea | pace is needed,<br>n.<br>ch Residence, E<br>re any legal or e | attach a separate sl   | neet to ti<br>her Real | nis form. On the                             | e are filing together, both are e<br>e top of any additional pages,<br>on or Have an Interest In<br>land, or similar property? |                               |                          | , ,  |
| 1.1                  | Yes. Where is the  |   |                        | What                   | is the property                              | /? Check all that apply  |                               |                          |  |
|                      | Street address, if a                                       | vood Lane<br>vailable, or other de                            | scription              |                        | Single-family had buplex or multicondominium |  | the amount of a               | any secured o            | ns or exemptions. Put claims on Schedule D: Secured by Property. |
|                      | Schaumbur  | g IL<br>State   | 60193-0000<br>ZIP Code |                        | Manufactured Land Investment pro             | or mobile home   | Current value entire property | <b>y</b> ?               | Current value of the portion you own? \$385,000.00               |
|                      |  |   |                        | Uho                    |  | in the property? Check one   |                               | imple, tenan<br>f known. | r ownership interest<br>cy by the entireties, or                 |
|                      | Cook   |   |                        |                        | Debtor 2 only                                |  |                               |                          |  |
|                      | County   |   |                        | ■<br>□<br>Othe         |  | Debtor 2 only<br>f the debtors and another<br>ou wish to add about this item   | (see instruct                 |                          | unity property   |
|                      |  |   |                        | prope                  | erty identification                          | on number:   |                               |                          |  |

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$385,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debto  | or 2 Anna Mashkovich  | Ca   |  |   |
|--|---|--|--|---|
| . Ca   | rs, vans, trucks, tractors, sport utility   | vehicles, motorcycles  |  |   |
|  |   | •  |  |   |
|  |   |  |  |   |
| •  | Yes   |  |  |   |
|  | Levue   |  | Do not deduct secured cl                 | laims or exemptions. Put  |
| 3.1  | Make: Lexus  Model: RX 350  | Who has an interest in the property? Check one   | the amount of any secure                 | ed claims on Schedule D:  |
|  |   | Debtor 1 only  | Creditors Who Have Clai                  | ims Secured by Property.  |
|  | Year: 2016 Approximate mileage: 55,000  | ☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only  | Current value of the<br>entire property? | Current value of the portion you own?   |
|  | Other information:  | ☐ At least one of the debtors and another  | entire property:                         | portion you own:  |
|  |   | At least one of the debtors and another  |  |   |
|  |   | Check if this is community property (see instructions)   | \$32,500.00                              | \$32,500.00   |
| 3.2  | Make: Acura   | Who has an interest in the property? Check one   | Do not deduct secured of                 | laims or exemptions. Put ed claims on Schedule D:                                 |
|  | Model: MDX  | Debtor 1 only  |  | ims Secured by Property.  |
|  | Year: <b>2004</b>   | Debtor 2 only  | Current value of the                     | Current value of the  |
|  | Approximate mileage: 120,000  | -  | entire property?                         | portion you own?  |
|  | Other information:  | ☐ At least one of the debtors and another  |  |   |
|  |   |  | \$3,000.00                               | \$3,000.00  |
|  |   | Check if this is community property (see instructions)   | Ψο,οσοίσο                                | Ψ5,000.00   |
| Exa  | amples: Boats, trailers, motors, personal   | and other recreational vehicles, other vehicles, an watercraft, fishing vessels, snowmobiles, motorcycle a   |  |   |
| Exa  | amples: Boats, trailers, motors, personal value  No  Yes  dd the dollar value of the portion you o  | watercraft, fishing vessels, snowmobiles, motorcycle a watercraft, fishing vessels, snowmobiles, motorcycle a watercraft, fishing vessels, snowmobiles, motorcycle a   | accessories ny entries for               | \$35,500.00   |
| Exa  | amples: Boats, trailers, motors, personal value  No  Yes  dd the dollar value of the portion you o  | watercraft, fishing vessels, snowmobiles, motorcycle a   | accessories ny entries for               | \$35,500.00   |
| Exa  Li  According to the second seco | amples: Boats, trailers, motors, personal value of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household   | watercraft, fishing vessels, snowmobiles, motorcycle a own for all of your entries from Part 2, including an e that number here  | ny entries for                           | Current value of the  |
| Exa  | amples: Boats, trailers, motors, personal value  No  Yes  dd the dollar value of the portion you cages you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable  | watercraft, fishing vessels, snowmobiles, motorcycle and the second seco | ny entries for                           | <u> </u>  |
| Exa  | Amples: Boats, trailers, motors, personal of the Months of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable ou own or have any legal or equitable ousehold goods and furnishings camples: Major appliances, furniture, lines No   | watercraft, fishing vessels, snowmobiles, motorcycle and set all of your entries from Part 2, including and that number here   | ny entries for                           | Current value of the portion you own? Do not deduct secured                       |
| Exa  | Amples: Boats, trailers, motors, personal value  No Yes  dd the dollar value of the portion you cages you have attached for Part 2. Write  Describe Your Personal and Household ou own or have any legal or equitable ou own goods and furnishings wamples: Major appliances, furniture, lines  | watercraft, fishing vessels, snowmobiles, motorcycle and set all of your entries from Part 2, including and that number here   | ny entries for                           | Current value of the portion you own? Do not deduct secured                       |
| Exa  | Amples: Boats, trailers, motors, personal value of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable busehold goods and furnishings camples: Major appliances, furniture, lines No   | watercraft, fishing vessels, snowmobiles, motorcycle and set all of your entries from Part 2, including and that number here   | ny entries for                           | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Exa  | Amples: Boats, trailers, motors, personal value of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable busehold goods and furnishings camples: Major appliances, furniture, lines No   | watercraft, fishing vessels, snowmobiles, motorcycle and the state of  | ny entries for                           | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Example 1  | Amples: Boats, trailers, motors, personal value of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable wasehold goods and furnishings wamples: Major appliances, furniture, lines No Yes. Describe  General and contents are camples: Televisions and radios; audio, valueling cell phones, cameras,   | watercraft, fishing vessels, snowmobiles, motorcycle and set and set that number here  | ny entries for                           | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Example 1  | Amples: Boats, trailers, motors, personal value of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable wasehold goods and furnishings wamples: Major appliances, furniture, lines No Yes. Describe  General and coectronics wamples: Televisions and radios; audio, v  | watercraft, fishing vessels, snowmobiles, motorcycle and set and set that number here  | ny entries for                           | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Example 1  | Amples: Boats, trailers, motors, personal of the portion you cages you have attached for Part 2. Write Describe Your Personal and Household ou own or have any legal or equitable wasehold goods and furnishings camples: Major appliances, furniture, liner No  Yes. Describe  General and content of the portion you can be a content of the portion you ca | watercraft, fishing vessels, snowmobiles, motorcycle and set and set that number here  | ny entries for                           | Current value of the portion you own? Do not deduct secured claims or exemptions. |

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

■ No

Debtor 1

Case 17-33692 Doc 1 Filed 11/09/17 Entered 11/09/17 20:33:32 Desc Main Page 12 of 56 Document Debtor 1 Oleksiy Sichkar Debtor 2 **Anna Mashkovich** Case number (if known) ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Necessary wearing apparel** \$450.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$750.00 General jewelry/costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,950.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ Yes..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes.....

Official Form 106A/B Schedule A/B: Property page 3

JP Morgan Chase

17.1. Checking

\$1,500.00

|                |                                 | Case 17-336  | 92           | Doc 1                         |                               | L1/09/17<br>Iment    | Entered 1<br>Page 13 of                      | .1/09/17 20:3<br>56   | 3:32       | Desc Main                     |
|----------------|---------------------------------|--|--------------|-------------------------------|-------------------------------|----------------------|--|-----------------------|------------|-------------------------------|
| Debte<br>Debte |                                 | Oleksiy Sichkar<br>Anna Mashkovi                                 |              |                               | 2000                          |                      | . a.go _o o.                                 | Case number (         | if known)  |                               |
|                |                                 |  |              |                               |                               | PMO Har              | ric Bonk                                     |                       |            |                               |
|                |                                 | 1  | 7.2.         | Business                      | checking                      | BMO Har<br>Aprox. Ba | alance: \$1,500                              |                       |            | \$1,500.00                    |
|                |                                 | 1  | 7.3.         | Checking                      |                               | BMO Har              | ris Bank                                     |                       |            | \$245.00                      |
| 40 <b>B</b>    |                                 |  |              |                               | -1                            |                      |  |                       |            |                               |
|                |                                 | mutual funds, or p<br>les: Bond funds, inve                      |              |                               |                               | ge firms, mor        | ney market accour                            | nts                   |            |                               |
|                | No                              |  |              |                               |                               |                      |  |                       |            |                               |
|                | Yes                             |  |              | Institution or is             | ssuer name                    | :                    |  |                       |            |                               |
| _j             | on-puloint ve                   |  | and i        | interests in in               | corporated                    | d and unince         | orporated busine                             | esses, including a    | n interest | t in an LLC, partnership, and |
|                |                                 | Give specific informa  | ation        | about them                    |                               |                      |  |                       |            |                               |
|                |                                 |  |              | ne of entity:                 |                               |                      |  | % of ownersh          | ip:        |                               |
|                |                                 |  | Ca           | ptain Logist                  | ics, Inc.                     |                      |  |                       |            |                               |
|                |                                 |  |              |                               |                               | own. Valu            | e in debtor's                                |                       |            |                               |
|                |                                 |  |              | e and labor,<br>)4 Freightlin |                               | bia with ap          | orox. 1,300,000                              |                       |            |                               |
|                |                                 |  | mil          |                               |                               | •                    | . ,  | 100                   | %          | \$5,000.00                    |
| 21. <b>R</b>   | etirem                          | Give specific information or pension accordes: Interests in IRA, | lssu<br>ount | uer name:                     | 1(k), 403(b)                  | , thrift saving      | s accounts, or oth                           | ner pension or profit | -sharing լ | blans                         |
|                |                                 | ist each account se  |              | ely.<br>of account:           |                               | Institution r        | namo:  |                       |            |                               |
|                |                                 |  |              | n account.                    |                               |                      |  |                       |            |                               |
|                |                                 | II   | RA           |                               |                               | Pension 1            | und - Mass. Lit                              | fe Ins.               |            | \$30,000.00                   |
| E              | ∕our sh<br>E <i>xampi</i><br>No | y deposits and prepare of all unused de les: Agreements with     | posit        | s you have ma                 | ade so that y<br>rent, public | utilities (ele       | tinue service or us<br>ctric, gas, water), i | telecommunications    | s compan   | ies, or others                |
| 23. <b>A</b>   | nnuiti                          | es (A contract for a p   | period       | dic pavment of                | money to y                    | ou. either fo        | r life or for a numb                         | per of vears)         |            |                               |
|                | No                              |  |              |                               |                               | ,                    |  | ,                     |            |                               |
|                | Yes                             | lssuer   | nam          | e and descript                | ion.                          |                      |  |                       |            |                               |
| 26             |                                 | s in an education IF<br>C. §§ 530(b)(1), 529A                    | ۸(b), a      | and 529(b)(1).                | ·                             |                      |  | •                     | ·          | gram.                         |
|                | Yes                             | Institu  | tion n       | ame and desc                  | cription. Sep                 | parately file th     | ne records of any                            | interests.11 U.S.C.   | § 521(c):  |                               |
|                | No                              | •  |              |                               | erty (other t                 | han anythin          | g listed in line 1)                          | , and rights or po    | wers exe   | rcisable for your benefit     |
| Ш              | Yes.                            | Give specific information  | ation        | about them                    |                               |                      |  |                       |            |                               |

Official Form 106A/B Schedule A/B: Property page 4

Entered 11/09/17 20:33:32 Case 17-33692 Doc 1 Filed 11/09/17 Desc Main Document Page 14 of 56 **Oleksiy Sichkar** Debtor 1 Debtor 2 **Anna Mashkovich** Case number (if known) 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Term life insurance Wife \$0.00 Term life insurance Husband \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No

☐ Yes. Give specific information..

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| Debtor 1          | Oleksiy Sichkar  | rage 15 or                  | 30                           |              |
|-------------------|--|-----------------------------|------------------------------|--------------|
| Debtor 2          | Anna Mashkovich  |                             | Case number (if known)       |              |
|                   | the dollar value of all of your entries from Part 4, includir<br>Part 4. Write that number here  |                             |                              | \$38,245.00  |
| Part 5: D         | escribe Any Business-Related Property You Own or Have an Inte  | rest In. List any real esta | ate in Part 1.               |              |
| 37. <b>Do you</b> | own or have any legal or equitable interest in any business-relat  | ed property?                |                              |              |
| No. G             | Go to Part 6.  |                             |                              |              |
| ☐ Yes.            | Go to line 38.   |                             |                              |              |
|                   | escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.                | ı Own or Have an Interes    | st In.                       |              |
| 46. <b>Do yo</b>  | ou own or have any legal or equitable interest in any farm-  | or commercial fishir        | ng-related property?         |              |
| ■ No              | o. Go to Part 7.   |                             |                              |              |
| ☐ Ye              | ss. Go to line 47.   |                             |                              |              |
| Part 7:           | Describe All Property You Own or Have an Interest in That You  | u Did Not List Above        |                              |              |
| Exam<br>■ No      | tu have other property of any kind you did not already list apples: Season tickets, country club membership  . Give specific information | ?                           |                              |              |
| 54. <b>Add</b>    | the dollar value of all of your entries from Part 7. Write th  | at number here              |                              | \$0.00       |
| Part 8:           | List the Totals of Each Part of this Form  |                             |                              |              |
| 55. <b>Part</b>   | 1: Total real estate, line 2   |                             |                              | \$385,000.00 |
| 56. <b>Part</b>   | 2: Total vehicles, line 5  | \$35,500.00                 |                              |              |
| 57. <b>Part</b>   | 3: Total personal and household items, line 15   | \$2,950.00                  |                              |              |
| 58. <b>Part</b>   | 4: Total financial assets, line 36   | \$38,245.00                 |                              |              |
| 59. <b>Part</b>   | 5: Total business-related property, line 45  | \$0.00                      |                              |              |
| 60. <b>Part</b>   | 6: Total farm- and fishing-related property, line 52   | \$0.00                      |                              |              |
| 61. <b>Part</b>   | 7: Total other property not listed, line 54 +  | \$0.00                      |                              |              |
| 62. <b>Tota</b>   | ll personal property. Add lines 56 through 61  | \$76,695.00                 | Copy personal property total | \$76,695.00  |
| 63. <b>Tota</b>   | ol of all property on Schedule A/B. Add line 55 + line 62  |                             |                              | \$461,695.00 |

Official Form 106A/B Schedule A/B: Property page 6

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|   |                         | 17(7(.1)1111      | III FAUE IOOLOO |                                     |    |
|---|-------------------------|-------------------|-----------------|-------------------------------------|----|
| Fill in this infor                      | mation to identify your | case:             |                 |                                     |    |
| Debtor 1                                | Oleksiy Sichkar         |                   |                 |                                     |    |
|   | First Name              | Middle Name       | Last Name       |                                     |    |
| Debtor 2                                | Anna Mashkovicl         | h                 |                 |                                     |    |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name       |                                     |    |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS     |                                     |    |
| Case number                             |                         |                   |                 |                                     |    |
| (if known)                              |                         |                   |                 | ☐ Check if this is a amended filing | ın |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1 | Which set of exemption | e are vou claiming? | Chack one only | avan if valir challs | a is filina with vau |
|---|------------------------|---------------------|----------------|----------------------|----------------------|
|   |                        |                     |                |                      |                      |

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim |   | Specific laws that allow exemption  |
|--------------------------------------|-----------------------------------|---|---|
| Copy the value from Schedule A/B     | Che                               | ck only one box for each exemption.                             |   |
| \$385,000.00                         |                                   | \$25,312.00   | 735 ILCS 5/12-901   |
|                                      |                                   | 100% of fair market value, up to any applicable statutory limit |   |
| \$3,000.00                           |                                   | \$2,400.00  | 735 ILCS 5/12-1001(c)   |
|                                      |                                   | 100% of fair market value, up to any applicable statutory limit |   |
| \$1,250.00                           |                                   | \$1,250.00  | 735 ILCS 5/12-1001(b)   |
|                                      |                                   | 100% of fair market value, up to any applicable statutory limit |   |
| \$500.00                             |                                   | \$500.00  | 735 ILCS 5/12-1001(b)   |
|                                      |                                   | 100% of fair market value, up to any applicable statutory limit |   |
| \$450.00                             |                                   | \$450.00  | 735 ILCS 5/12-1001(a)   |
|                                      |                                   | 100% of fair market value, up to any applicable statutory limit |   |
|                                      | \$3,000.00 \$1,250.00             | \$3,000.00 \$1,250.00 \$\$500.00 \$\$450.00                     | \$385,000.00  \$385,000.00  \$385,000.00  \$100% of fair market value, up to any applicable statutory limit  \$1,250.00  \$100% of fair market value, up to any applicable statutory limit  \$1,250.00  \$100% of fair market value, up to any applicable statutory limit  \$1,00% of fair market value, up to any applicable statutory limit  \$500.00  \$100% of fair market value, up to any applicable statutory limit  \$450.00  \$450.00  \$100% of fair market value, up to any applicable statutory limit |

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Anna Mashkovich Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B General jewelry/costume jewelry 735 ILCS 5/12-1001(b) \$750.00 \$750.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: JP Morgan Chase** 735 ILCS 5/12-1001(b) \$1,500.00 \$1,500.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Captain Logistics, Inc. 735 ILCS 5/12-1001(b) \$4,000.00 \$5,000.00 Value of business unknown. Value in debtor's time and labor, except: 100% of fair market value, up to 2004 Freightliner Columbia with any applicable statutory limit aprox. 1,300,000 miles 100 % ownership Line from Schedule A/B: 19.1 IRA: Pension fund - Mass. Life Ins. 735 ILCS 5/12-1006 \$30,000.00 \$30,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? П No Yes

Debtor 1

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|   |                             | Document   | Page 1              | 8 ot 56                                   | <u></u>                                      |                   |
|---|-----------------------------|--|---------------------|---|--|-------------------|
| Fill in this inform                     | ation to identify you       | r case:  |                     |   |  |                   |
| Debtor 1                                | Oleksiy Sichkar             |  |                     |   |  |                   |
| Debtor 1                                | First Name                  | Middle Name  | Last Name           |   |  |                   |
| Debtor 2                                | Anna Mashkovid              | ch   |                     |   |  |                   |
| (Spouse if, filing)                     | First Name                  | Middle Name  | Last Name           |   |  |                   |
| United States Ban                       | kruptcy Court for the:      | NORTHERN DISTRICT OF ILL   | INOIS               |   |  |                   |
| Jou Glatoo Barr                         | αριοή Θοαιτίοι αιοί         |  |                     |   |  |                   |
| Case number                             |                             |  |                     |   |  |                   |
| (if known)                              |                             |  |                     |   | _  | if this is an     |
|   |                             |  |                     |   | amend  | led filing        |
| Official Form                           | 106D                        |  |                     |   |  |                   |
|   |                             | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   | _                   |   |  |                   |
| Schedule                                | D: Creditors                | Who Have Claims:   | <u>Secure</u>       | d by Propert                              | <u>y                                    </u> | 12/15             |
| s needed, copy the                      |                             | f two married people are filing togethout, number the entries, and attach it t |                     |   |  |                   |
| number (if known).                      |                             |  |                     |   |  |                   |
|   | have claims secured by      |  |                     |   |  |                   |
| ☐ No. Check                             | this box and submit the     | nis form to the court with your other  | schedules. Y        | ou have nothing else t                    | o report on this form.                       |                   |
| Yes. Fill in                            | all of the information b    | pelow.   |                     |   |  |                   |
| Part 1: List All                        | Secured Claims              |  |                     |   |  |                   |
| •                                       | claims. If a creditor has n | nore than one secured claim, list the cre                                      | ditor separatel     | Column A                                  | Column B                                     | Column C          |
| for each claim. If mo                   | ore than one creditor has   | a particular claim, list the other creditors                                   | s in Part 2. As     | Amount of claim                           | Value of collateral                          | Unsecured         |
| much as possible, lis                   | st the claims in alphabetic | cal order according to the creditor's name                                     | е.                  | Do not deduct the<br>value of collateral. | that supports this claim                     | portion<br>If any |
| 2.1 Chase Moi                           | rtgage                      | Describe the property that secures t   | he claim:           | \$359,688.00                              | \$385,000.00                                 | \$0.00            |
| Creditor's Name                         |                             | 527 Cottonwood Lane Schau  | umburg,             |   |  |                   |
|   |                             | IL 60193 Cook County   |                     |   |  |                   |
| 2445 Visio                              | D                           | As of the date you file, the claim is:   | Check all that      |   |  |                   |
| 3415 Visio                              | n Dr<br>, OH 43219          | apply.   |                     |   |  |                   |
|   | City, State & Zip Code      | ☐ Contingent   |                     |   |  |                   |
| Number, Street,                         | City, State & Zip Code      | ☐ Unliquidated ☐ Disputed  |                     |   |  |                   |
| Who owes the del                        | bt? Check one.              | Nature of lien. Check all that apply.  |                     |   |  |                   |
| Debtor 1 only                           |                             | ☐ An agreement you made (such as r   | nortgage or se      | ecured                                    |  |                   |
| Debtor 2 only                           |                             | car loan)  | 0 0                 |   |  |                   |
| ■ Debtor 1 and Del                      | btor 2 only                 | ☐ Statutory lien (such as tax lien, med  | chanic's lien)      |   |  |                   |
| ☐ At least one of th                    | e debtors and another       | ☐ Judgment lien from a lawsuit   |                     |   |  |                   |
| ☐ Check if this cla                     | aim relates to a            | Other (including a right to offset)  | Mortgage            |   |  |                   |
| community deb                           | ot                          | ,  |                     |   |  |                   |
|   | Opened                      |  |                     |   |  |                   |
|   | 10/12 Last                  |  |                     |   |  |                   |
| Date debt was incu                      | rred Active 08/16           | Last 4 digits of account number  | <sub>ber</sub> 5295 |   |  |                   |
|   |                             |  |                     |   |  |                   |
| 2.2 Toyota Mo                           |                             | Describe the property that secures t   | he claim:           | \$44,151.00                               | Unknown                                      | \$44,151.00       |
| Creditor's Name                         |                             | Automobile   |                     |   |  |                   |
|   |                             |  |                     |   |  |                   |
| 1111 W 22                               | nd St Ste 420               | As of the date you file, the claim is:   | Check all that      |   |  |                   |
| Oak Brook                               |                             | apply.  Contingent   |                     |   |  |                   |
|   | City, State & Zip Code      | ☐ Unliquidated   |                     |   |  |                   |
| , | ,,,                         | ☐ Disputed   |                     |   |  |                   |
| Who owes the del                        | bt? Check one.              | Nature of lien. Check all that apply.  |                     |   |  |                   |
| Debtor 1 only                           |                             | ☐ An agreement you made (such as r   | nortgage or se      | ecured                                    |  |                   |
| Debtor 2 only                           |                             | car loan)  |                     |   |  |                   |
| Debtor 1 and Del                        | btor 2 only                 | ☐ Statutory lien (such as tax lien, med  | chanic's lien)      |   |  |                   |
|   | e debtors and another       | ☐ Judgment lien from a lawsuit   |                     |   |  |                   |
| ☐ Check if this cla                     |                             | Other (including a right to offset)  |                     |   |  |                   |

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| Debtor 1 Oleksiy Sichkar   |  | Case number (if know)                |                          |             |
|--|--|--------------------------------------|--------------------------|-------------|
| First Name Middle N  | lame Last Name   |                                      |                          |             |
| Debtor 2 Anna Mashkovich First Name Middle N   | lame Last Name   |                                      |                          |             |
| i list Name ivildue i  | Last Name  |                                      |                          |             |
| Opened 06/16 Last Active Date debt was incurred 7/31/16                                  | Last 4 digits of account number 000  | 1                                    |                          |             |
| <u> </u>   |  |                                      |                          |             |
| 2.3 Toyota Motor Credit  | Describe the property that secures the claim:  | \$33,733.00                          | \$32,500.00              | \$1,233.00  |
| Creditor's Name  | 2016 Lexus RX 350 55,000 miles   |                                      |                          |             |
| 4444 W. 22md Ctmost  |  |                                      |                          |             |
| 1111 W. 22nd Street<br>Suite 420   | As of the date you file, the claim is: Check all that  | J                                    |                          |             |
| Oak Brook, IL 60523  | apply.  ☐ Contingent   |                                      |                          |             |
| Number, Street, City, State & Zip Code   | ☐ Unliquidated   |                                      |                          |             |
| ,,,,   | ☐ Disputed   |                                      |                          |             |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.  |                                      |                          |             |
| ☐ Debtor 1 only  | ☐ An agreement you made (such as mortgage or   | secured                              |                          |             |
| Debtor 2 only  | car loan)  |                                      |                          |             |
| ■ Debtor 1 and Debtor 2 only   | ☐ Statutory lien (such as tax lien, mechanic's lien  | )                                    |                          |             |
| At least one of the debtors and another  | ☐ Judgment lien from a lawsuit   |                                      |                          |             |
| ☐ Check if this claim relates to a community debt  | Other (including a right to offset)  Purchas   | e money security                     |                          |             |
| Date debt was incurred June 2016   | Last 4 digits of account number 000  | 1                                    |                          |             |
| Add the deller value of very entries in 6  | Naluma A an this ways Write that womber have   | ¢427.572.00                          | ์<br>โ                   |             |
| If this is the last page of your form, add   | Column A on this page. Write that number here:   | \$437,572.00                         |                          |             |
| Write that number here:  |  | \$437,572.00                         | ַן                       |             |
| Part 2: List Others to Be Notified for   | or a Debt That You Already Listed  |                                      |                          |             |
| Use this page only if you have others to be trying to collect from you for a debt you of | oe notified about your bankruptcy for a debt that<br>owe to someone else, list the creditor in Part 1, ar<br>t you listed in Part 1, list the additional creditors | d then list the collection agenc     | y here. Similarly, if yo | u have more |
|  | 7: 0 1   |                                      |                          |             |
| Name, Number, Street, City, State & Fannie Mae   | Zip Code On  | which line in Part 1 did you enter t | he creditor? 2.1         |             |
| c/o Johnson Blumberg Ass<br>230 W. Monroe, Unit 1125<br>Chicago, IL 60606                | SOC. Las   | t 4 digits of account number         |                          |             |
| Name, Number, Street, City, State & Seterus, Inc.  | . 311  | which line in Part 1 did you enter t | he creditor? 2.1         |             |
| PO Box 54420<br>Los Angeles, CA 90054-042  |  | t 4 digits of account number         |                          |             |

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|                                      | 0430 17 00032 20  | Document  | Page 20 of 56  | 0.02 0000              | VICIII               |
|--------------------------------------|---|---|--|------------------------|----------------------|
| Fill in th                           | is information to identify your cas   |   |  |                        |                      |
| Debtor 1                             | Oleksiy Sichkar   |   |  |                        |                      |
| DODIOI 1                             | First Name  | Middle Name   | Last Name  |                        |                      |
| Debtor 2                             | Anna Mashkovich   |   |  |                        |                      |
| (Spouse if,                          | filing) First Name  | Middle Name   | Last Name  |                        |                      |
| United S                             | tates Bankruptcy Court for the:   | IORTHERN DISTRICT OF ILL  | LINOIS   |                        |                      |
| Case nu                              | mber  |   |  |                        |                      |
| (if known)                           |   |   |  | ☐ Chec                 | k if this is an      |
|                                      |   |   |  | amer                   | nded filing          |
| Officia                              | l Form 106E/F   |   |  |                        |                      |
|                                      | dule E/F: Creditors Who   | h Have Unsecured  | Claims   |                        | 12/15                |
|                                      |   |   | Y claims and Part 2 for creditors with No  | ONDDIODITY -I-i        |                      |
| Schedule<br>left. Attacl<br>name and | D: Creditors Who Have Claims Secure<br>h the Continuation Page to this page. I<br>case number (if known).                                   | d by Property. If more space is r<br>f you have no information to rep | o not include any creditors with partiall needed, copy the Part you need, fill it ou port in a Part, do not file that Part. On the           | it, number the entries | in the boxes on the  |
| Part 1:                              | List All of Your PRIORITY Unse  |   |  |                        |                      |
| _                                    | ny creditors have priority unsecured cl   | aims against you?   |  |                        |                      |
| ■ N                                  | o. Go to Part 2.  |   |  |                        |                      |
| □ Y                                  | es.   |   |  |                        |                      |
| Part 2:                              | List All of Your NONPRIORITY L  | Insecured Claims  |  |                        |                      |
| 3. Do a                              | ny creditors have nonpriority unsecure  | ed claims against you?  |  |                        |                      |
| □N                                   | o. You have nothing to report in this part.   | Submit this form to the court with                                    | your other schedules.  |                        |                      |
| ■ Y                                  | 25  |   |  |                        |                      |
| 4. List a                            | all of your nonpriority unsecured claim<br>cured claim, list the creditor separately for<br>one creditor holds a particular claim, list the | each claim. For each claim listed                                     | e creditor who holds each claim. If a cre<br>l, identify what type of claim it is. Do not list<br>have more than three nonpriority unsecured | claims already include | d in Part 1. If more |
|                                      |   |   |  | To                     | otal claim           |
| 4.1                                  | Alexian Brothers Medical Cent   | er Last 4 digits of acco  | ount number 1975   |                        | Unknown              |
|                                      | Nonpriority Creditor's Name   | When wee the debt   |  | _                      |                      |
|                                      | 800 Biesterfield Road<br>Elk Grove Village, IL 60007  | When was the debt   | incurred?  |                        |                      |
|                                      | Number Street City State Zlp Code   | As of the date you f  | file, the claim is: Check all that apply   |                        |                      |
| ,                                    | Who incurred the debt? Check one.   | ·   |  |                        |                      |
| I                                    | Debtor 1 only   | ☐ Contingent  |  |                        |                      |
| 1                                    | Debtor 2 only   | ☐ Unliquidated  |  |                        |                      |
|                                      | Debtor 1 and Debtor 2 only  | ☐ Disputed  |  |                        |                      |
|                                      | ☐ At least one of the debtors and anothe  | T (NONDDIOD   | ITY unsecured claim:   |                        |                      |
|                                      | ☐ Check if this claim is for a commur   | П от т  |  |                        |                      |
| •                                    | debt Is the claim subject to offset?  | <u> </u>  | ng out of a separation agreement or divorce  | e that you did not     |                      |
|                                      | No  |   | or profit-sharing plans, and other similar d   | ebts                   |                      |
|                                      | □ Yes   | Other. Specify  |  |                        |                      |
|                                      | <b>—</b> 103  | <ul> <li>Other. Specify</li> </ul>                                    |  |                        |                      |

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|     | 1 Oleksiy Sichkar<br>2 Anna Mashkovich   |  | Case number (if know)                         |             |  |  |  |  |
|-----|--|--|---|-------------|--|--|--|--|
| 4.2 | Carson's Nonpriority Creditor's Name   | Last 4 digits of account number  | 8906  | \$1,062.00  |  |  |  |  |
|     | PO Box 659813<br>San Antonio, TX 78265-9113  | When was the debt incurred?  |   |             |  |  |  |  |
| •   | Number Street City State Zlp Code Who incurred the debt? Check one.                            | As of the date you file, the claim   | is: Check all that apply                      |             |  |  |  |  |
|     | ☐ Debtor 1 only ☐ Debtor 2 only  | ☐ Contingent   |   |             |  |  |  |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Unliquidated☐ Disputed   |   |             |  |  |  |  |
|     | At least one of the debtors and another  | Type of NONPRIORITY unsecure  ☐ Student loans                                | d claim:                                      |             |  |  |  |  |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?                  |  | aration agreement or divorce that you did not |             |  |  |  |  |
|     | ■ No   | Debts to pension or profit-sharir  | ng plans, and other similar debts             |             |  |  |  |  |
|     | Yes  | Other. Specify Credit Card   |   |             |  |  |  |  |
| 4.3 | Chase Card Services  | Last 4 digits of account number  | 5431  | \$11,454.00 |  |  |  |  |
|     | Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298                             | When was the debt incurred?  | Opened 04/09 Last Active 07/16                |             |  |  |  |  |
|     | Wilmington, DE 19850  Number Street City State Zlp Code  Who incurred the debt? Check one.     | As of the date you file, the claim   |   |             |  |  |  |  |
|     | Debtor 1 only  | ☐ Contingent   |   |             |  |  |  |  |
|     | Debtor 2 only  | ☐ Unliquidated   | ☐ Unliquidated                                |             |  |  |  |  |
|     | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |   |             |  |  |  |  |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecure   |   |             |  |  |  |  |
|     | ☐ Check if this claim is for a community debt Is the claim subject to offset?                  | ☐ Student loans ☐ Obligations arising out of a separate as priority aloises. |   |             |  |  |  |  |
|     | No   | report as priority claims  Debts to pension or profit-sharir                 |   |             |  |  |  |  |
|     | □ Yes  | Other. Specify Credit Card   |   |             |  |  |  |  |
| 4.4 | Citibank/Best Buy  | Last 4 digits of account number  | 2220  | \$4,106.00  |  |  |  |  |
|     | Nonpriority Creditor's Name Citicorp/Centralized Bankruptcy Po Box 790040 Caint Levia MO 62470 | When was the debt incurred?  | Opened 5/08/05 Last Active 7/12/16            |             |  |  |  |  |
|     | Saint Louis, MO 63179  Number Street City State Zlp Code                                       | As of the date you file, the claim   | is: Check all that apply                      |             |  |  |  |  |
|     | Who incurred the debt? Check one.  | _  |   |             |  |  |  |  |
|     | Debtor 1 only  | Contingent   |   |             |  |  |  |  |
|     | Debtor 2 only  | Unliquidated   |   |             |  |  |  |  |
|     | ■ Debtor 1 and Debtor 2 only   | Disputed   |   |             |  |  |  |  |
|     | At least one of the debtors and another  | Type of NONPRIORITY unsecure  ☐ Student loans                                |   |             |  |  |  |  |
|     | ☐ Check if this claim is for a community debt  Is the claim subject to offset?                 | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims |   |             |  |  |  |  |
|     | No   | Debts to pension or profit-sharir  | o plans, and other similar debts              |             |  |  |  |  |
|     | □ Yes  | ■ Other. Specify Credit Card   |   |             |  |  |  |  |
|     | — ·  | - Other. Specify   | <u> </u>                                      |             |  |  |  |  |

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|     | 1 Oleksiy Sichkar<br>2 Anna Mashkovich   |   | Case number (if know)   |              |  |  |  |
|-----|--|---|---|--------------|--|--|--|
| 4.5 | Codilis & Associates, PC   | Last 4 digits of account number                             | 3220  | \$0.00       |  |  |  |
|     | Nonpriority Creditor's Name 15W030 North Frontage Rd., Ste. 100                            | When was the debt incurred?                                 |   |              |  |  |  |
|     | Burr Ridge, IL 60527  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                          | n is: Check all that apply  |              |  |  |  |
|     | ☐ Debtor 1 only  | ☐ Contingent  |   |              |  |  |  |
|     | Debtor 2 only  | Unliquidated  |   |              |  |  |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |              |  |  |  |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecur                                 | ed claim:   |              |  |  |  |
|     | ☐ Check if this claim is for a community   | ☐ Student loans   |   |              |  |  |  |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepreport as priority claims | paration agreement or divorce that you did not  |              |  |  |  |
|     | ■ No   | Debts to pension or profit-shar                             | ing plans, and other similar debts  |              |  |  |  |
|     | ☐ Yes  | Forciosur   | e that went into forclosure.<br>e ended in August 2015. Amount<br>ncy, if any, unknown. |              |  |  |  |
| 4.6 | Discover Financial Nonpriority Creditor's Name   | Last 4 digits of account number                             | 4852  | \$12,090.00  |  |  |  |
|     | Po Box 3025<br>New Albany, OH 43054  | When was the debt incurred?                                 | Opened 03/10 Last Active 07/16  |              |  |  |  |
|     | Number Street City State Zlp Code  Who incurred the debt? Check one.                       | As of the date you file, the claim                          | is: Check all that apply  |              |  |  |  |
|     | ☐ Debtor 1 only  | ☐ Contingent  |   |              |  |  |  |
|     | ☐ Debtor 2 only  | ☐ Unliquidated  |   |              |  |  |  |
|     | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |              |  |  |  |
|     | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecur                                 |   |              |  |  |  |
|     | ☐ Check if this claim is for a community   | ☐ Student loans   |   |              |  |  |  |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepreport as priority claims |   |              |  |  |  |
|     | ■ No   | Debts to pension or profit-shar                             |   |              |  |  |  |
|     | Yes  | Other. Specify Credit Car                                   |   |              |  |  |  |
| 4.7 | Dyck Oneal Inc   | Last 4 digits of account number                             | 3426  | \$107,907.00 |  |  |  |
|     | Nonpriority Creditor's Name  | _   | One and 00/45 Least Aptive  |              |  |  |  |
|     | 6060 N Central Expy Ste<br>Dallas, TX 75206  | When was the debt incurred?                                 | Opened 09/15 Last Active 03/11  |              |  |  |  |
|     | Number Street City State Zlp Code Who incurred the debt? Check one.                        | As of the date you file, the claim                          |   |              |  |  |  |
|     | ☐ Debtor 1 only  | ☐ Contingent  |   |              |  |  |  |
|     | Debtor 2 only  | ☐ Unliquidated  |   |              |  |  |  |
|     | ■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another                    | ☐ Disputed  Type of NONPRIORITY unsecur                     |   |              |  |  |  |
|     | ☐ Check if this claim is for a community   | ☐ Student loans   |   |              |  |  |  |
|     | debt Is the claim subject to offset?   | ☐ Obligations arising out of a sepreport as priority claims |   |              |  |  |  |
|     | No   | Debts to pension or profit-shar                             |   |              |  |  |  |
|     |  | ·   | for Freedom Mortgage  |              |  |  |  |
|     | □Yes   | Corporation for closure                                     | on; real estate that went into eat the above case number. e completed in April 2015.    |              |  |  |  |

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|     | 1 Oleksiy Sichkar<br>2 Anna Mashkovich  |  | Case number (if know)                         |            |  |  |
|-----|---|--|---|------------|--|--|
| 4.8 | Elan Financial Service Nonpriority Creditor's Name  | Last 4 digits of account number  | 3829  | \$6,171.00 |  |  |
|     | Po Box 108 Saint Louis, MO 63166 Number Street City State Zlp Code  | When was the debt incurred?  As of the date you file, the claim  | Opened 07/04 Last Active 07/16                |            |  |  |
|     | Who incurred the debt? Check one.   | _  | <b>з.</b> Опеск ан шасарру                    |            |  |  |
|     | ☐ Debtor 1 only ☐ Debtor 2 only   | ☐ Contingent<br>☐ Unliquidated   |   |            |  |  |
|     | ■ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim is for a community       | ☐ Disputed  Type of NONPRIORITY unsecure  ☐ Student loans  | d claim:                                      |            |  |  |
|     | debt Is the claim subject to offset?  | report as priority claims  | aration agreement or divorce that you did not |            |  |  |
|     | ■ No □ Yes  | Debts to pension or profit-sharin  |   |            |  |  |
|     | □ Yes   | Other. Specify Credit Card   |   |            |  |  |
| 4.9 | GC Services Limited Partnership  Nonpriority Creditor's Name  | Last 4 digits of account number  | 4552  | \$3,931.00 |  |  |
|     | PO Box 930824<br>Wixom, MI 48393-0824   | When was the debt incurred?  |   |            |  |  |
|     | Number Street City State Zlp Code Who incurred the debt? Check one.   | As of the date you file, the claim   | is: Check all that apply                      |            |  |  |
|     | ☐ Debtor 1 only ☐ Debtor 2 only   | ☐ Contingent   |   |            |  |  |
|     | ■ Debtor 1 and Debtor 2 only  | ☐ Unliquidated☐ Disputed   |   |            |  |  |
|     | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? | Type of NONPRIORITY unsecure  ☐ Student loans ☐ Obligations arising out of a separeport as priority claims |   |            |  |  |
|     | ■ No  | Debts to pension or profit-sharing   |   |            |  |  |
|     | Yes   | Other. Specify Credit Card   | l; collection for Citibank                    |            |  |  |
| 4.1 | Kohl's Payment Center Nonpriority Creditor's Name   | Last 4 digits of account number  | 4913  | \$492.00   |  |  |
|     | PO Box 2983<br>Milwaukee, WI 53201-2983   | When was the debt incurred?  |   |            |  |  |
|     | Number Street City State Zlp Code Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply  |   |            |  |  |
|     | Debtor 1 only   | ☐ Contingent   | ☐ Contingent                                  |            |  |  |
|     | Debtor 2 only   | ☐ Unliquidated   |   |            |  |  |
|     | ■ Debtor 1 and Debtor 2 only  | ☐ Disputed   |   |            |  |  |
|     | At least one of the debtors and another   | Type of NONPRIORITY unsecure   |   |            |  |  |
|     | ☐ Check if this claim is for a community debt   | Student loans  |   |            |  |  |
|     | Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | aration agreement or divorce that you did not |            |  |  |
|     | ■ No  | Debts to pension or profit-sharing   | g plans, and other similar debts              |            |  |  |
|     | ☐ Yes   | Other. Specify Credit Card   | 1   |            |  |  |

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|          | 1 Oleksiy Sichkar<br>2 Anna Mashkovich   |   | Case number (if know)                         |            |
|----------|--|---|---|------------|
| 4.1<br>1 | Merchants Credit   | Last 4 digits of account number                                 | 0029  | \$700.00   |
|          | Nonpriority Creditor's Name 223 W Jackson Blvd Ste 700 Chicago, IL 60606 Number Street City State Zlp Code | When was the debt incurred?  As of the date you file, the claim | Opened 02/16 Last Active 02/12                |            |
|          | Who incurred the debt? Check one.  | As of the date you me, the claim                                | <b>э.</b> Опеск ан шасарру                    |            |
|          | Debtor 1 only  | ☐ Contingent  |   |            |
|          | Debtor 2 only  | Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                                     | ☐ Disputed  Type of NONPRIORITY unsecured                       | d claim:                                      |            |
|          | _  | Student loans   |   |            |
|          | Check if this claim is for a community debt  | ☐ Obligations arising out of a sepa                             | ration agreement or divorce that you did not  |            |
|          | Is the claim subject to offset?  ■ No  | report as priority claims  Debts to pension or profit-sharin    | g plans, and other similar debts              |            |
|          | Yes  | Collection of Orthopaedi  | Attorney Midamerica                           |            |
|          |  | <u> </u>  |   |            |
| 4.1      | Sears Credit Cards  Nonpriority Creditor's Name  | Last 4 digits of account number                                 | 4552  | \$4,014.00 |
|          | PO Box 78051<br>Phoenix, AZ 85062-8051   | When was the debt incurred?                                     |   |            |
|          | Number Street City State Zlp Code  | As of the date you file, the claim i                            | is: Check all that apply                      |            |
|          | Who incurred the debt? Check one.  |   |   |            |
|          | ☐ Debtor 1 only  | ☐ Contingent  |   |            |
|          | Debtor 2 only  | ☐ Unliquidated  |   |            |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |            |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                   | d claim:                                      |            |
|          | ☐ Check if this claim is for a community debt  | ☐ Student loans ☐ Obligations arising out of a sepa             | ration agreement or divorce that you did not  |            |
|          | Is the claim subject to offset?  | report as priority claims                                       |   |            |
|          | ■ No   | Debts to pension or profit-sharin                               |   |            |
|          | ☐ Yes  | Other. Specify Credit Card                                      | <u> </u>                                      |            |
| 4.1      | St. Alexius Medical Center   | Last 4 digits of account number                                 | 1975  | Unknown    |
|          | Nonpriority Creditor's Name 1555 Barrington Road Hoffman Estates, IL 60169                                 | When was the debt incurred?                                     |   |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.                                       | As of the date you file, the claim                              | is: Check all that apply                      |            |
|          | ☐ Debtor 1 only  | ☐ Contingent  |   |            |
|          | Debtor 2 only  | ☐ Unliquidated  |   |            |
|          | ■ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |            |
|          | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                   | d claim:                                      |            |
|          | ☐ Check if this claim is for a community debt  | Student loans   |   |            |
|          | Is the claim subject to offset?  | report as priority claims                                       | aration agreement or divorce that you did not |            |
|          | ■ No   | Debts to pension or profit-sharing                              | g plans, and other similar debts              |            |
|          | Yes  | ■ Other. Specify Medical  |   |            |

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| Debtor 2 | Anna Ma                        | shkovich   |  | Case         | number (if    | know)  |  |  |
|----------|--------------------------------|--|--|--------------|---------------|--|--|--|
| 4.1      | TJX Reward                     | de/SVNCB   | Look A. Politon of control of control  | er 6662      | )             |  | \$343.00                                     |  |
| 4        | Nonpriority Cree PO Box 530    | ditor's Name   | Last 4 digits of account number When was the debt incurred?  | er 0002      | <u>-</u>      | -  | <del></del>                                  |  |
|          | Atlanta, GA                    | 30353-0948   | _  |              |               |  | _  |  |
|          |                                | City State Zlp Code the debt? Check one.                     | As of the date you file, the clai  | m is: Chec   | k all that ap | pply   |  |  |
|          | Debtor 1 on                    | ly   | ☐ Contingent   |              |               |  |  |  |
|          | Debtor 2 on                    | ly   | ☐ Unliquidated   |              |               |  |  |  |
|          | ■ Debtor 1 an                  | d Debtor 2 only  | ☐ Disputed   |              |               |  |  |  |
|          | ☐ At least one                 | of the debtors and another                                   | Type of NONPRIORITY unsecu   | red claim:   |               |  |  |  |
|          | _                              | is claim is for a community                                  | ☐ Student loans  |              |               |  |  |  |
|          | debt                           |  | ☐ Obligations arising out of a se  | eparation a  | greement o    | r divorce that you did no                              | t  |  |
|          |                                | bject to offset?   | report as priority claims  |              |               |  |  |  |
|          | No                             |  | ☐ Debts to pension or profit-sha   | aring plans, | and other s   | similar debts  |  |  |
|          | ☐ Yes                          |  | Other. Specify Credit Ca   | ard          |               |  |  |  |
| Part 3:  | List Others                    | s to Be Notified About a De                                  | bt That You Already Listed   |              |               |  |  |  |
| is tryin | g to collect fro               | m you for a debt you owe to so                               | about your bankruptcy, for a debt the<br>omeone else, list the original credito<br>at you listed in Parts 1 or 2, list the a<br>or submit this page. | r in Parts 1 | or 2, then    | list the collection ager                               | ncy here. Similarly, if you                  |  |
|          | d Address                      |  | On which entry in Part 1 or Part 2 did y   | ou list the  | original cred | ditor?   |  |  |
|          | & Associa                      |  | Line 4.7 of (Check one):   | <del></del>  |               |  |  |  |
| 15WU3    | u North Fro                    | ntage Rd., Ste.  |  | Part 2:      | Creditors w   | vith Nonpriority Unsecure                              | ed Claims                                    |  |
|          | idge, IL 605                   | 27   |  |              |               |  |  |  |
|          | _                              |  | Last 4 digits of account number  |              |               |  |  |  |
|          | d Address<br>ants & Medi       | ical   | On which entry in Part 1 or Part 2 did y   |              | •             |  |  |  |
|          | aylor Drive                    | Cai  | Line 4.10 of (Check one):  |              |               | vith Priority Unsecured C<br>vith Nonpriority Unsecure |  |  |
| Flint, N | 11 48507-468                   | 85   | Last 4 digits of account number  | — T alt 2.   | Creditors w   | with Nonphonity Onsecure                               | su Olaims                                    |  |
|          |                                |  | Last 4 digits of account fluriber  |              |               |  |  |  |
| Part 4:  | Add the A                      | mounts for Each Type of U                                    | nsecured Claim   |              |               |  |  |  |
|          | ne amounts of<br>unsecured cla |  | ims. This information is for statistica  | al reporting | g purposes    | only. 28 U.S.C. §159. A                                | Add the amounts for each                     |  |
| 71       |                                |  |  |              |               | Total Claim  |  |  |
|          | 6a.                            | Domestic support obligation                                  | s  | 6a.          | \$            | 0.0  | 00   |  |
|          | otal<br>ims                    |  |  |              |               |  |  |  |
| from Pa  |                                | Taxes and certain other debt                                 | •  | 6b.          | \$            | 0.0  | 00   |  |
|          | 6c.                            | •  | injury while you were intoxicated  | 6c.          | \$            | 0.0  |  |  |
|          | 6d.                            | Other. Add all other priority un                             | secured claims. Write that amount here   | . 6d.        | \$            | 0.0  | <u>00                                   </u> |  |
|          | 6e.                            | Total Priority. Add lines 6a thr                             | ough 6d.   | 6e.          | \$            | 0.0  | 00   |  |
|          |                                |  |  |              |               | Total Claim  |  |  |
|          | 6f.                            | Student loans  |  | 6f.          | \$            | 0.0  | 00   |  |
|          | otal<br>ims                    |  |  |              |               |  |  |  |
| from Pa  |                                |  | eparation agreement or divorce that  | 0            | ¢             | 0.0  | 10   |  |
|          | 6h.                            | you did not report as priority Debts to pension or profit-sh | claims aring plans, and other similar debts  | 6g.<br>6h.   | \$<br>\$      | 0.0  |  |  |
|          | 6i.                            | ·  | unsecured claims. Write that amount  | 6i.          | Ψ             |  | <u></u>                                      |  |
|          |                                | here.  |  |              | \$            | 152,270.0  | <del></del>                                  |  |
|          | 6i.                            | Total Nonpriority. Add lines 6                               | f through 6i   | 6i.          | \$            | 152 270 0  | 10   |  |

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|                     |                          | 1717111           |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor  | mation to identify your  | case:             |             |  |
| Debtor 1            | Oleksiy Sichkar          |                   |             |  |
|                     | First Name               | Middle Name       | Last Name   |  |
| Debtor 2            | Anna Mashkovicl          | h                 |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| ı   | Person or | company with | whom you have the | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-------------------|---------------------|---|
| 2.1 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.2 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | <u> </u>                                |
| 2.3 | City      |              | State             | ZIF Code            |   |
| 2.0 | Name      |              |                   |                     | <u> </u>                                |
|     | Number    | Street       |                   |                     |   |
|     | City      |              | State             | ZIP Code            | _                                       |
| 2.4 |           |              |                   |                     |   |
|     | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | _                                       |
|     | City      |              | State             | ZIP Code            | <u> </u>                                |
| 2.5 | Oity      |              | Otate             | ZII COUE            |   |
| 0   | Name      |              |                   |                     |   |
|     | Number    | Street       |                   |                     | <u> </u>                                |
|     | City      |              | State             | ZIP Code            | _                                       |

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|  |  | Docume  | nt Page 27 o                                    | of 56  |
|--|--|---|---|--|
| Fill in this in                                  | formation to identify your   | case:   |   |  |
| Debtor 1   | Oleksiy Sichkar  |   |   |  |
| DODIOI 1   | First Name   | Middle Name   | Last Name                                       |  |
| Debtor 2   | Anna Mashkovich  | า   |   |  |
| (Spouse if, filing)                              | First Name   | Middle Name   | Last Name                                       |  |
| United States                                    | Bankruptcy Court for the:  | NORTHERN DISTRICT   | OF ILLINOIS                                     |  |
|  |  |   |   |  |
| Case number<br>(if known)                        | r  |   |   | ☐ Check if this is an  |
|  |  |   |   | amended filing   |
| Schedu   | Form 106H le H: Your Cod   |   | ts you may haye. Be a                           | 12/15 as complete and accurate as possible. If two married   |
| people are fil<br>ill it out, and<br>our name ar | ing together, both are equ<br>number the entries in the<br>nd case number (if known) | ally responsible for supp<br>boxes on the left. Attach<br>. Answer every question | lying correct information the Additional Page ( | tion. If more space is needed, copy the Additional Page, to this page. On the top of any Additional Pages, write   |
| 1. Do yo   | u have any codebtors? (If  | you are filing a joint case, o  | do not list either spouse                       | e as a codebtor.   |
| ■ No<br>□ Yes                                    |  |   |   |  |
| Arizona,  No. Go                                 | California, Idaho, Louisiana,<br>o to line 3.  | Nevada, New Mexico, Pu  | erto Rico, Texas, Wash                          | ry? (Community property states and territories include ington, and Wisconsin.)   |
| 3. In Colum<br>in line 2<br>Form 10              | again as a codebtor only i 6D), Schedule E/F (Official                               | ors. Do not include your<br>f that person is a guaran                             | spouse as a codebto<br>tor or cosigner. Make    | r if your spouse is filing with you. List the person shown<br>sure you have listed the creditor on Schedule D (Official<br>06G). Use Schedule D, Schedule E/F, or Schedule G to fill |
| out Colu   | ımn 2.   |   |   |  |
|  | dumn 1: Your codebtor<br>ne, Number, Street, City, State and ZI                      | P Code  |   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| 2.1  |  |   |   | ☐ Schedule D. line   |
| 3.1 Nar  | me   |   |   | Schedule D, line  ☐ Schedule E/F, line   |
|  |  |   |   | ☐ Schedule G, line   |
|  |  |   |   | Scriedule G, lille   |
| Nur<br>City                                      | mber Street  | State   | ZIP Code  |  |
|  |  |   |   |  |
| 3.2  |  |   |   | Schedule D, line   |
| Nar  | me   |   |   | ☐ Schedule E/F, line   |
|  |  |   |   | ☐ Schedule G, line   |
| Nur  | mber Street  |   |   | _  |
| City   |  | State   | ZIP Code  |  |

Schedule H: Your Codebtors

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| Fill in this informat           | tion to identify your case:                           |  |
|---------------------------------|---|--|
| Debtor 1                        | Oleksiy Sichkar                                       |  |
| Debtor 2<br>(Spouse, if filing) | Anna Mashkovich                                       |  |
| United States Ban               | skruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS |  |
| Case number (If known)          |   | Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter |
| Official Fo                     | rm 106l   | 13 income as of the following date:  MM / DD/ YYYY                                 |

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Truck Driver** Unemployed Include part-time, seasonal, or **Employer's name** Captain Logistics, Inc. **Pension & Disability Income** self-employed work. **Employer's address** Occupation may include student 527 Cottonwood Lane 527 Cottonwood Lane or homemaker, if it applies. Schaumburg, IL 60193 Schaumburg, IL 60193 How long employed there? 19 March 2010 to 1994/2016 to present present

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 0.00 0.00

Official Form 106I Schedule I: Your Income page 1

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|     | tor 1<br>tor 2 | Oleksiy Sichkar<br>Anna Mashkovich   | -          | Cas      | e number (if known) |       |                                 |              |
|-----|----------------|--|------------|----------|---------------------|-------|---------------------------------|--------------|
|     | Con            | y line 4 here  | 4.         | Fo       | or Debtor 1         |       | btor 2 or<br>ing spouse<br>0.00 |              |
|     | СОР            | y line 4 nere  | 4.         | Ψ        | 0.00                | Ψ     | 0.00                            |              |
| 5.  | List           | all payroll deductions:  |            |          |                     |       |                                 |              |
|     | 5a.            | Tax, Medicare, and Social Security deductions  | 5a.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 5b.            | Mandatory contributions for retirement plans   | 5b.        | \$<br>\$ | 0.00                | \$    | 0.00                            |              |
|     | 5c.<br>5d.     | Voluntary contributions for retirement plans Required repayments of retirement fund loans  | 5c.<br>5d. | \$       | 0.00                | \$    | 0.00                            |              |
|     | 5e.            | Insurance  | 5e.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 5f.            | Domestic support obligations   | 5f.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 5g.            | Union dues   | 5g.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 5h.            | Other deductions. Specify:   | _ 5h.+     | \$       | 0.00                | + \$  | 0.00                            |              |
| 6.  | Add            | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.         | \$       | 0.00                | \$    | 0.00                            |              |
| 7.  | Calc           | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.         | \$       | 0.00                | \$    | 0.00                            |              |
| 8.  | List<br>8a.    | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total              |            |          |                     |       |                                 |              |
|     |                | monthly net income.  | 8a.        | \$       | 4,366.00            | \$    | 0.00                            |              |
|     | 8b.            | Interest and dividends   | 8b.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 8c.            | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 8d.<br>8e.     | Unemployment compensation Social Security  | 8d.<br>8e. | \$<br>\$ | 0.00                | \$    | 0.00                            |              |
|     | 8f.            | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:   |            | \$       | 0.00                | \$    | 0.00                            |              |
|     | 8g.            | Pension or retirement income   | 8g.        | \$       | 0.00                | \$    | 0.00                            |              |
|     | 8h.            | Other monthly income. Specify: Pension from 1st husband Social Security/Disability   | _ 8h.+     | \$<br>\$ | 0.00                | + \$  | 740.00                          |              |
|     |                | 2nd Pension from 1st husband   | _          | \$       | 0.00                | \$    | 53.00                           |              |
| 9.  | Add            | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.         | \$_      | 4,366.00            | \$    | 1,458.00                        |              |
| 10. |                | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10. \$     |          | 4,366.00 + \$_      | 1,458 | 8.00 = \$                       | 5,824.00     |
| 11. | Inclu<br>othe  | e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify: | depen      |          | •                   |       | edule J.<br>11. +\$             | 0.00         |
| 12. |                | the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certainies  |            |          |                     |       | T- L                            | 5,824.00     |
| 13. | Do y           | you expect an increase or decrease within the year after you file this form?   | ?          |          |                     |       | Combin-<br>monthly              | ed<br>income |
|     | Ш              | Yes. Explain:  |            |          |                     |       |                                 |              |

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| Fill in this                          | information to identify yo  | our case:                                |   |  |                 |                 |                               |
|---------------------------------------|---|--|---|--|-----------------|-----------------|-------------------------------|
| Debtor 1                              | Oleksiy Sich  | kar                                      |   |  |                 | ck if this is:  |                               |
| Debtor 2<br>(Spouse, if               | Anna Mashk  | ovich                                    | <ul> <li>An amended filing</li> <li>A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul> |  |                 |                 |                               |
| United State                          | es Bankruptcy Court for the   | : NORTH                                  | IERN DISTRICT OF ILLIN  | OIS                                      | _               | MM / DD / YYYY  |                               |
| Case numb<br>(If known)               | er  |  |   |  |                 |                 |                               |
| Officia                               | al Form 106J  |  |   |  |                 |                 |                               |
|                                       | dule J: Your  | Exper                                    | ISAS  |  |                 |                 | 12/15                         |
| Be as cor<br>information<br>number (i | mplete and accurate as<br>on. If more space is ne<br>if known). Answer ever | s possible.<br>eded, atta<br>ry question | If two married people ar<br>ch another sheet to this  |  |                 |                 |                               |
| Part 1:                               | Describe Your House is a joint case?  | enoia                                    |   |  |                 |                 |                               |
|                                       | o. Go to line 2.  |  |   |  |                 |                 |                               |
| ■ Y                                   | es. Does Debtor 2 live  | in a separ                               | ate household?  |  |                 |                 |                               |
|                                       | ■ No □ Yes. Debtor 2 mus  | st file Offici                           | al Form 106J-2, <i>Expense</i> s  | for Separate House                       | ehold of Deb    | tor 2.          |                               |
| 2. <b>Do v</b>                        | ou have dependents?   | ■ No                                     |   |  |                 |                 |                               |
| -                                     | ot list Debtor 1 and  | □ Yes.                                   | Fill out this information for each dependent  | Dependent's relati<br>Debtor 1 or Debtor |                 | Dependent's age | Does dependent live with you? |
| Do n                                  | ot state the  |  |   |  |                 |                 | □ No                          |
| depe                                  | ndents names.   |  |   |  |                 |                 | ☐ Yes                         |
|                                       |   |  |   |  |                 |                 | □ No                          |
|                                       |   |  |   |  |                 |                 | ☐ Yes                         |
|                                       |   |  |   |  |                 |                 | □ No<br>□ Yes                 |
|                                       |   |  |   | -  |                 |                 | □ res                         |
|                                       |   |  |   |  |                 |                 | ☐ Yes                         |
| expe                                  | our expenses include<br>enses of people other t<br>self and your depende    | han $_{f \Box}$                          | No<br>Yes   |  |                 |                 |                               |
|                                       | as of a date after the l  | our bankrı                               | y Expenses<br>uptcy filing date unless y<br>y is filed. If this is a supp   |  |                 |                 |                               |
| the value                             |   |  | government assistance it<br>luded it on <i>Schedule I: Y</i>  |  |                 | Your exp        | enses                         |
|                                       | rental or home owners<br>nents and any rent for th                          |  | ses for your residence. In  | nclude first mortgage                    | e<br>4. \$      |                 | 1,250.00                      |
| If no                                 | t included in line 4:   |  |   |  |                 |                 |                               |
| 4a.                                   | Real estate taxes   |  |   |  | 4a. \$          |                 | 0.00                          |
| 4b.                                   | Property, homeowner's   |  |   |  | 4b. \$          |                 | 20.00                         |
| 4c.                                   | Home maintenance, re  |  |   |  | 4c. \$          |                 | 0.00                          |
| 4d.                                   | Homeowner's associat  |  | dominium dues<br>ou <b>r residence</b> , such as ho   | me equity loans                          | 4d. \$<br>5. \$ |                 | 0.00                          |

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|     | for 2 Anna Mashkovich   | Case num | ber (if known) |          |
|-----|---|----------|----------------|----------|
| 6.  | Utilities:  |          |                |          |
| 0.  | 6a. Electricity, heat, natural gas  | 6a.      | \$             | 350.00   |
|     | 6b. Water, sewer, garbage collection  | 6b.      | · -            | 0.00     |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services                      | 6c.      | \$             | 300.00   |
|     | 6d. Other. Specify:   | 6d.      | ·              | 0.00     |
| 7.  | Food and housekeeping supplies  | 7.       | *              | 750.00   |
| 8.  | Childcare and children's education costs  | 8.       | ·              | 0.00     |
| 9.  | Clothing, laundry, and dry cleaning   | 9.       | *              | 50.00    |
| -   | Personal care products and services   | 10.      | · •            | 50.00    |
| 11. | Medical and dental expenses   | 11.      | ·              | 500.00   |
|     | <b>Transportation.</b> Include gas, maintenance, bus or train fare.                     |          | <u> </u>       | 300.00   |
| 14. | Do not include car payments.  | 12.      | \$             | 400.00   |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books                      | 13.      | \$             | 50.00    |
|     | Charitable contributions and religious donations  | 14.      | \$             | 25.00    |
|     | Insurance.  |          |                |          |
| -   | Do not include insurance deducted from your pay or included in lines 4 or 20.           |          |                |          |
|     | 15a. Life insurance   | 15a.     | \$             | 200.00   |
|     | 15b. Health insurance   | 15b.     | \$             | 1,050.00 |
|     | 15c. Vehicle insurance  | 15c.     | \$             | 154.00   |
|     | 15d. Other insurance. Specify:  | 15d.     | \$             | 0.00     |
| 16. | <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. |          |                |          |
|     | Specify:  | 16.      | \$             | 0.00     |
| 17. | Installment or lease payments:  |          |                |          |
|     | 17a. Car payments for Vehicle 1   | 17a.     | \$             | 792.00   |
|     | 17b. Car payments for Vehicle 2   | 17b.     | \$             | 0.00     |
|     | 17c. Other. Specify:  | 17c.     | \$             | 0.00     |
|     | 17d. Other. Specify:  | 17d.     | \$             | 0.00     |
| 18. | Your payments of alimony, maintenance, and support that you did not report a            |          | •              | 0.00     |
|     | deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)          | ). 18.   |                | 0.00     |
| 19. | Other payments you make to support others who do not live with you.                     |          | \$             | 0.00     |
|     | Specify:  | 19.      | _              |          |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Sch        |          |                |          |
|     | 20a. Mortgages on other property  | 20a.     | · -            | 0.00     |
|     | 20b. Real estate taxes  | 20b.     | · -            | 0.00     |
|     | 20c. Property, homeowner's, or renter's insurance                                       | 20c.     |                | 0.00     |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d.     |                | 0.00     |
|     | 20e. Homeowner's association or condominium dues  | 20e.     | ·              | 0.00     |
| 21. | Other: Specify:   | 21.      | +\$            | 0.00     |
| 22  | Calculate your monthly expenses   |          |                |          |
|     | 22a. Add lines 4 through 21.  |          | \$             | 5,941.00 |
|     | 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2    |          | \$             | 0,071.00 |
|     |   |          | ·              | E 044 00 |
|     | 22c. Add line 22a and 22b. The result is your monthly expenses.                         |          | \$             | 5,941.00 |
| 23. | Calculate your monthly net income.  |          |                |          |
|     | 23a. Copy line 12 (your combined monthly income) from Schedule I.                       | 23a.     | \$             | 5,824.00 |
|     | 23b. Copy your monthly expenses from line 22c above.                                    | 23b.     | -\$            | 5,941.00 |
|     | •••   |          |                |          |
|     | 23c. Subtract your monthly expenses from your monthly income.                           |          | •              | 447.00   |
|     | The result is your monthly net income.  | 23c.     | \$             | -117.00  |

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.

☐ Yes.

Explain here: Rent and utilities are projected as current real estate is to be surrendered.

Debtors' medical expenses, outside of medical insurance, includes medication and treatment for depression, anxiety, blood-pressure, high cholesterol, stomach issues, psychological treatment, and acid-reflex, which is not covered by insurance or deductible payments.

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| Fill in this inform |   |   |  |
|---------------------|---|---|--|
|                     | mation to identify your                           | case:   |  |
| Debtor 1            | Oleksiy Sichkar                                   | ACT III AT                                      |  |
|                     | First Name  | Middle Name Last Name                           |  |
| Debtor 2            | Anna Mashkovic                                    |   |  |
| (Spouse if, filing) | First Name  | Middle Name Last Name                           |  |
| United States Ba    | ankruptcy Court for the:                          | NORTHERN DISTRICT OF ILLINOIS                   |  |
| Case number         |   |   |  |
| (if known)          |   |   | ☐ Check if this is an  |
| ()                  |   |   | amended filing   |
| You must file thi   | is form whenever you t                            | n connection with a bankruptcy case can result  | orrect information.  s. Making a false statement, concealing property, or in fines up to \$250,000, or imprisonment for up to 20 |
| Sign                | n Below   |   |  |
| Did you pa          | y or agree to pay some                            | one who is NOT an attorney to help you fill out | bankruptcy forms?  |
| ■ No                |   |   |  |
| ☐ Yes. N            | Name of person                                    |   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)                                     |
|                     | alty of perjury, I declare<br>e true and correct. | that I have read the summary and schedules fil  | ed with this declaration and   |
| X /s/ Ole           | ksiy Sichkar                                      | X /s/ Anna I                                    | Mashkovich   |
|                     | y Sichkar   | Anna Mas  | shkovich   |
| Signatu             | re of Debtor 1                                    | Signature of                                    | of Debtor 2  |
| Date                | October 31, 2017                                  | Date Oc   | tober 31, 2017   |

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|                    | in this inforr                            | nation to identify you   | r case:                            |                            |              |   |                                    |              |   |
|--------------------|---|--|------------------------------------|----------------------------|--------------|---|------------------------------------|--------------|---|
| Deb                | otor 1                                    | Oleksiy Sichkar  | Middl                              | le Name                    |              | _ast Name                               |                                    |              |   |
| Deb                | otor 2                                    | Anna Mashkovid   |                                    | ic Name                    |              | Last Name                               |                                    |              |   |
| (Spo               | ouse if, filing)                          | First Name   |                                    | e Name                     | I            | _ast Name                               |                                    |              |   |
| Uni                | ted States Ba                             | nkruptcy Court for the:  | NORTHE                             | RN DISTRICT                | OF ILLIN     | OIS                                     |                                    |              |   |
|                    | se number _                               |  |                                    |                            |              |   |                                    | _            | heck if this is an                                    |
| Of                 | ficial Fo                                 | rm 107   |                                    |                            |              |   |                                    | ai           | nended filing   |
| Sta                | atement                                   | of Financial   | Affairs                            | for Indivi                 | iduals       | Filing for E                            | Bankruptcy                         |              | 4/10  |
| info<br>num        | rmation. If m                             | ind accurate as possiore space is needed,<br>n). Answer every que      | attach a se <sub>l</sub><br>stion. | parate sheet to            | this for     | m. On the top of a                      |                                    |              |   |
| 1.                 |   | r current marital statu  |                                    | and Where To               | u Liveu i    | Serore                                  |                                    |              |   |
|                    | <ul><li>Married</li><li>Not mai</li></ul> | ried   |                                    |                            |              |   |                                    |              |   |
| 2.                 | During the la                             | ast 3 years, have you  | lived anywh                        | nere other than            | n where v    | ou live now?                            |                                    |              |   |
|                    | _   | ,,   | ,                                  |                            | ,            |   |                                    |              |   |
|                    | ■ No □ Yes. Lis                           | t all of the places you l  | ived in the la                     | st 3 years. Do r           | not includ   | e where you live no                     | w.                                 |              |   |
|                    | Debtor 1 Pr                               | ior Address:   |                                    | Dates Debtor 1 lived there | 1            | Debtor 2 Prior A                        | Address:                           |              | Dates Debtor 2<br>lived there                         |
| <b>3.</b><br>state |   | ast 8 years, did you ev<br>es include Arizona, Ca                      |                                    |                            |              |   |                                    |              | ? (Community property isconsin.)                      |
|                    | ■ No □ Yes. Ma                            | ike sure you fill out <i>Scl</i>                                       | nedule H: Vo                       | ur Codehtors (C            | Official Fo  | rm 106H)                                |                                    |              |   |
|                    |   | ike sure you iiii out <i>soi</i>                                       | redule 11. 10                      | ui Codebiois (C            | Jiliciai i o | 1111 10011).                            |                                    |              |   |
| Par                | t 2 Explai                                | n the Sources of You   | r Income                           |                            |              |   |                                    |              |   |
| 4.                 | Fill in the tota                          | e any income from er<br>al amount of income young a joint case and you | u received fr                      | om all jobs and            | all busine   | esses, including pai                    | rt-time activities.                | evious calen | dar years?  |
|                    | □ No ■ Yes. Fil                           | in the details.  |                                    |                            |              |   |                                    |              |   |
|                    |   |  | Debtor 1                           |                            |              |   | Debtor 2                           |              |   |
|                    |   |  | Sources of<br>Check all th         |                            | (befo        | s income<br>re deductions and<br>sions) | Sources of inc<br>Check all that a |              | Gross income<br>(before deductions<br>and exclusions) |
|                    | · last calenda<br>nuary 1 to De           | r year:<br>cember 31, 2016)  | ■ Wages, bonuses, tip              | commissions,               |              | \$23,000.00                             | ☐ Wages, combonuses, tips          | missions,    | \$0.00  |
|                    |   |  | ■ Operatir                         | ng a business              |              |   | ☐ Operating a                      | business     |   |

Official Form 107

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**Oleksiy Sichkar** Debtor 1 Debtor 2 Anna Mashkovich Case number (if known)

|   | Debtor 1   |             | Debtor 2                                   |   |  |  |
|---|--|-------------|--|---|--|--|
|   |  |             |  |   |  |  |
|   | Sources of income Check all that apply.  Gross income (before deductions and exclusions) |             | Sources of income<br>Check all that apply. | Gross income<br>(before deductions<br>and exclusions) |  |  |
|   | ☐ Wages, commissions, bonuses, tips  | \$30,537.00 | ☐ Wages, commissions, bonuses, tips        | \$0.00  |  |  |
|   | Operating a business   |             | ☐ Operating a business                     |   |  |  |
| For the calendar year before that:<br>(January 1 to December 31, 2015 ) | ☐ Wages, commissions, bonuses, tips \$65,273.00  |             | ☐ Wages, commissions, bonuses, tips        | \$0.00  |  |  |
|   | Operating a business   |             | ☐ Operating a business                     |   |  |  |
|   | ■ Wages, commissions, bonuses, tips  | \$18,000.00 | ■ Wages, commissions, bonuses, tips        | \$7,646.00  |  |  |
|   | Operating a business   |             | ☐ Operating a business                     |   |  |  |
|   |  |             |  |   |  |  |

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

П

Yes. Fill in the details.

|   | Debtor 1                             |  | Debtor 2                             |   |
|---|--------------------------------------|--|--------------------------------------|---|
|   | Sources of income<br>Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below. | Gross income<br>(before deductions<br>and exclusions) |
| For last calendar year:<br>(January 1 to December 31, 2016)         | Pension Distribution                 | \$8,651.00   | Social Security                      | \$7,400.00  |
| For the calendar year before that: (January 1 to December 31, 2015) | Pension Distribution                 | \$8,651.00   |                                      |   |
|   | Cancelled Debt                       | \$9,782.00   |                                      |   |
|   | Federal Income Tax<br>Return         | \$2,139.00   |                                      |   |
|   | State Income Tax<br>Return           | \$970.00   |                                      |   |
|   | Gross rental income                  | \$60,662.00  |                                      |   |

### List Certain Payments You Made Before You Filed for Bankruptcy

| <ol><li>Are either Debtor 1's or Debtor 2's debts primarily consume</li></ol> | debts? |
|---|--------|
|---|--------|

☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

□ No. Go to line 7.

List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do

not include payments to an attorney for this bankruptcy case.

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| ebtor 1  | 1 Oleksiy Sich  |   |  |   |  |   |
|--|---|---|--|---|--|---|
| ebtor 2  |   |   |  | Cas   | e number (if known)  |   |
|  | * Subject   | to adjustment on 4/01/1   | 9 and every 3 years after  | that for cases filed on   | or after the date of   | of adjustment.  |
|  |   |   | ve primarily consumer do   |   | ıl of \$600 or more  | ?   |
|  | _   |   | a .e. saap.e,, a.a yea p   | cay any organion a tota   | 0. 4000 0  | •   |
|  | ■ No.<br>□ <sub>Yes</sub>   | Go to line 7.   |  | -l -f \$000   |  | De not  |
|  | □ Yes   |   | domestic support obligatio   |   |  | you paid that creditor. Do not<br>Also, do not include payments to a  |
| Cre  | editor's Name and   | d Address   | Dates of payment   | Total amount paid   | Amount you still owe   | Was this payment for  |
| <i>Insi</i><br>of w<br>a bu  | <i>ider</i> s include your r<br>vhich you are an of   | elatives; any general pa<br>ficer, director, person in  | control, or owner of 20%   | eneral partners; partner or more of their voting  | erships of which you   | was an insider? ou are a general partner; corporation on managing agent, including one one, such as child support and   |
| Inc  |   | nents to an insider.  | Dates of naument   | Total amount  | A mount you  | Pageon for this navment   |
| ins  | sider's Name and  | Address   | Dates of payment   | Total amount paid   | Amount you still owe   | Reason for this payment   |
| 52   | ichael Mashkov<br>17 Cottonwood<br>:haumburg, IL 6  |   | Oct. 23, 2017  | \$4,930.16  | \$0.00   | Deck repainted: \$402 Garage doors replaced: \$3,200 Front door columns repaired and repainted: \$1,328.16 From damage on 527 Cottonwood, Schaumburg Illinois |
|  |   |   | ov did vou mako anv na   |   | iny property on a  | ccount of a debt that benefited a   |
| insi   | ider?<br>lude payments on o   | debts guaranteed or cos   |  | yments or transfer a  | my property on a   | ccount of a dept that beliefited a  |
| insi<br>Incl   | ider?<br>ude payments on o  | debts guaranteed or cos   |  | yments or transfer a  | Amount you   | Reason for this payment   |
| insi<br>Incl   | ider? ude payments on o<br>No<br>Yes. List all payn   | debts guaranteed or cos   | signed by an insider.  |   |  |   |
| insi<br>Incl<br>Incl<br>Ins  | ider? No Yes. List all payn   | debts guaranteed or cos   | signed by an insider.  Dates of payment  | Total amount  | Amount you   | Reason for this payment   |
| insi<br>Incl<br>Insi<br>Ins<br>Vit   | ider?  No Yes. List all payn sider's Name and  Identify Legal A   | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupte   | Dates of payment  ns, and Foreclosures  cy, were you a party in a                            | Total amount paid   | Amount you<br>still owe<br>tion, or administr                                      | Reason for this payment Include creditor's name   |
| insi<br>Incli<br>Insi<br>Ins<br>With   | ider?  No Yes. List all payn sider's Name and  Identify Legal A thin 1 year before all such matters, in   | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupte   | Dates of payment  ns, and Foreclosures  cy, were you a party in a                            | Total amount paid   | Amount you<br>still owe<br>tion, or administr                                      | Reason for this payment Include creditor's name rative proceeding?  |
| insi<br>Incl<br>Ins<br>Ins<br>with   | ider?  No Yes. List all payn sider's Name and  Identify Legal A thin 1 year before all such matters, in   | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupte including personal injury intract disputes. | Dates of payment  ns, and Foreclosures  cy, were you a party in a                            | Total amount paid   | Amount you<br>still owe<br>tion, or administr                                      | Reason for this payment Include creditor's name rative proceeding?  |
| insi   | ider? No Yes. List all payn sider's Name and Identify Legal A thin 1 year before all such matters, in diffications, and core  | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupte including personal injury intract disputes. | Dates of payment  ns, and Foreclosures  cy, were you a party in a                            | Total amount paid   | Amount you<br>still owe<br>tion, or administr                                      | Reason for this payment Include creditor's name rative proceeding?  |
| Inside Including Including Inside Ins | ider?  No Yes. List all payn sider's Name and  Identify Legal A thin 1 year before all such matters, in diffications, and cor  No Yes. Fill in the de use title use number unnie Mae v. Sic | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupt including personal injury intract disputes.  | Dates of payment  ns, and Foreclosures  cy, were you a party in a cases, small claims action | Total amount paid  any lawsuit, court act ns, divorces, collection  Court or agency  Cook County, I | Amount you still owe tion, or administration suits, paternity a                    | Reason for this payment Include creditor's name  rative proceeding? actions, support or custody   |
| Insi Incl  | ider?  No Yes. List all payn sider's Name and  Identify Legal A thin 1 year before all such matters, in diffications, and cor  No Yes. Fill in the de use title use number                  | debts guaranteed or cosments to an insider  Address  Actions, Repossession  you filed for bankrupt including personal injury intract disputes.  | Dates of payment  ns, and Foreclosures  cy, were you a party in a cases, small claims action | Total amount paid  any lawsuit, court act as divorces, collection  Court or agency                  | Amount you still owe tion, or administration suits, paternity a llinois ton Street | Reason for this payment Include creditor's name  rative proceeding? actions, support or custody  Status of the case   |

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| _    | btor 1 Oleksiy Sichkar<br>btor 2 Anna Mashkovich   | Case numb   | Der (if known)             |                          |  |  |
|------|--|---|----------------------------|--------------------------|--|--|
| 10.  | Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.         |   |                            |                          |  |  |
|      | <ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>   |   |                            |                          |  |  |
|      | Creditor Name and Address  | Describe the Property   | Date                       | Value of the property    |  |  |
|      |  | Explain what happened   |                            |                          |  |  |
| 11.  | Within 90 days before you filed for bank accounts or refuse to make a payment back.  No Yes. Fill in the details.  | ruptcy, did any creditor, including a bank or financial<br>because you owed a debt?                             | institution, set off any a | mounts from your         |  |  |
|      | Creditor Name and Address  | Describe the action the creditor took   | Date action was            | Amount                   |  |  |
|      |  |   | taken                      |                          |  |  |
| 12.  | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? |   |                            |                          |  |  |
|      | ■ No □ Yes   |   |                            |                          |  |  |
| Day  | The Liet Contain Cifts and Contain the   |   |                            |                          |  |  |
|      | rt 5: List Certain Gifts and Contribution  |   |                            |                          |  |  |
| 13.  | Within 2 years before you filed for bank   | ruptcy, did you give any gifts with a total value of mor  | e than \$600 per person?   | ?                        |  |  |
|      | Yes. Fill in the details for each gift.  |   |                            |                          |  |  |
|      | Gifts with a total value of more than \$60 per person  | Describe the gifts  | Dates you gave the gifts   | Value                    |  |  |
|      | Person to Whom You Gave the Gift and Address:  |   |                            |                          |  |  |
| 14.  | ■ No   | ruptcy, did you give any gifts or contributions with a t  | otal value of more than    | \$600 to any charity?    |  |  |
|      | Yes. Fill in the details for each gift or of Gifts or contributions to charities that  |   | Dates you                  | Value                    |  |  |
|      | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod  | ,   | contributed                | Value                    |  |  |
| Par  | rt 6: List Certain Losses  |   |                            |                          |  |  |
| 15.  |  | uptcy or since you filed for bankruptcy, did you lose a   | nything because of thef    | t, fire, other disaster, |  |  |
| □ No |  |   |                            |                          |  |  |
|      | Yes. Fill in the details.  |   |                            |                          |  |  |
|      | Describe the property you lost and   | Describe any insurance coverage for the loss  | Date of your               | Value of property        |  |  |
|      | how the loss occurred  | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | g                          | lost                     |  |  |
|      | Property damage to house "mico-burst" (hail).  | State Farm  | July 21, 2017              | \$26,580.16              |  |  |

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Debtor 1 Oleksiy Sichkar Debtor 2 Anna Mashkovich Case number (if known) Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Amount of Description and value of any property Date payment **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Kaplan Law Offices, P.C. **Attorney Fees** 19 August \$500.00 3400 Dundee Road 2016 Suite 150 Northbrook, IL 60062 alex@alexkaplanlegal.com Kaplan Law Offices, P.C. **Attorney Fees** October 23. \$1,400.00 3400 Dundee Road 2017 Suite 150 Northbrook, IL 60062 alex@alexkaplanlegal.com **Cricket Debt Counseling Credit Counseling for both debtors** November 3, \$25.00 2017 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you Darbest, Inc. Stucco siding repairs on 527 \$2,700 - 8/31/2017 626 Verona Court Cottonwood Lane, \$4,000 - 9/8/2017 Schaumburg, IL 60193 Schaumburg, Illinois Contractor om U.A., Inc. Asphalt shingle roof \$11,000 10/6/2017 4775 N. Linder Ave. replaced on 527 Cottonwood Apt. 1 Lane, Schaumburg, Illinois Chicago, IL 60630 Contractor

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Debtor 1 Oleksiy Sichkar Debtor 2 Anna Mashkovich Case number (if known) **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you \$1,450 - 9/14/2017 Ivan Romanyshok **Gutters and flashing** W. Natalie Lane replaced on 527 Cottonwood \$2,500 - 9/18/2017 Addison, IL 60101 Lane, Schaumburg, Illinois Contractor Michael Mashkovich Deck repained, garage door 10/23/2017 Deck repainted: \$402 527 Cottonwood Lane replaced, front door columns Garage doors replaced: Schaumburg, IL 60193 repaired and repainted on \$3,200 527 Cottonwood Lane, Front door columns Contractor/son Schaumurg, Illinois repaired and repainted: \$1,328.16 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred XXXX-**BMO Harris Bank Personal** \$30.00 Checking checking □ Savings account ■ Money Market April 2017 -□ Brokerage closed by BMO □ Other Harris 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still to it? have it? Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City,

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Debtor 1 Oleksiy Sichkar Debtor 2 Anna Mashkovich

Case number (if known)

| Pai | t 9: Identify Property You Hold or Control for  | Someone Else  |         |                                      |                       |  |  |
|-----|---|---|---------|--------------------------------------|-----------------------|--|--|
| 23. | Do you hold or control any property that some for someone.  | one else owns? Include any prope  | rty you | u borrowed from, are storing fo      | r, or hold in trust   |  |  |
|     | ■ No  |   |         |                                      |                       |  |  |
|     | Yes. Fill in the details.   |   |         |                                      |                       |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)   | Desc    | cribe the property                   | Value                 |  |  |
| Pai | t 10: Give Details About Environmental Inform   | ation   |         |                                      |                       |  |  |
| For | the purpose of Part 10, the following definitions   | apply:  |         |                                      |                       |  |  |
|     | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, groun                                     |         |                                      |                       |  |  |
|     | Site means any location, facility, or property as to own, operate, or utilize it, including disposal  |   | law, w  | vhether you now own, operate,        | or utilize it or used |  |  |
|     | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or   |   | s wast  | e, hazardous substance, toxic        | substance,            |  |  |
| Rep | ort all notices, releases, and proceedings that y   | ou know about, regardless of whe  | n they  | occurred.                            |                       |  |  |
| 24. | Has any governmental unit notified you that yo  | u may be liable or potentially liable                                     | e unde  | r or in violation of an environm     | ental law?            |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |         |                                      |                       |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) |         | Environmental law, if you know it    | Date of notice        |  |  |
| 25. | Have you notified any governmental unit of any  | release of hazardous material?  |         |                                      |                       |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |         |                                      |                       |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State an<br>ZIP Code) |         | Environmental law, if you<br>know it | Date of notice        |  |  |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.                 |   |         |                                      |                       |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |         |                                      |                       |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)   | Natu    | ire of the case                      | Status of the case    |  |  |
| Pai | t 11: Give Details About Your Business or Cor   | nnections to Any Business   |         |                                      |                       |  |  |
| 27. | Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?                |   |         |                                      |                       |  |  |
|     | ■ A sole proprietor or self-employed in a   | trade, profession, or other activity                                      | , eithe | r full-time or part-time             |                       |  |  |
|     | ☐ A member of a limited liability company   | (LLC) or limited liability partnersh                                      | nip (LL | .P)                                  |                       |  |  |
|     | ☐ A partner in a partnership  |   |         |                                      |                       |  |  |
|     | ☐ An officer, director, or managing execu   | tive of a corporation   |         |                                      |                       |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corneration   |   |         |                                      |                       |  |  |

Entered 11/09/17 20:33:32 Case 17-33692 Doc 1 Filed 11/09/17 Page 40 of 56 Document Debtor 1 Oleksiy Sichkar Debtor 2 Anna Mashkovich Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Business Name Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper **Dates business existed** EIN: Captain Logistics, Inc. **Trucking** 27-2253364 527 Cottonwood Lane From-To 19 March 2010 to present Alina K. Gluck Schaumburg, IL 60193 Geltco. Inc. 425 Huehl Road, Suite 4-B Northbrook, Illinois 60062 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Anna Mashkovich /s/ Oleksiy Sichkar **Anna Mashkovich Oleksiy Sichkar** Signature of Debtor 1 Signature of Debtor 2 Date October 31, 2017 Date October 31, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). ☐ Yes. Name of Person

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| Debtor 1           | Oleksiy Sichka | ır          |           |                       |
|--------------------|----------------|-------------|-----------|-----------------------|
|                    | First Name     | Middle Name | Last Name |                       |
| Debtor 2           | Anna Mashkov   | rich        |           |                       |
| Spouse if, filing) | First Name     | Middle Name | Last Name |                       |
|                    |                |             |           |                       |
| Case number        |                |             |           |                       |
| (if known)         |                |             |           | ☐ Check if this is ar |
|                    |                |             |           | amended filing        |

### Statement of Intention for Individuals Filing Under Chapter /

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

| Identify the creditor and the property that is collateral                    | What do you intend to do with the property that secures a debt?   | Did you claim the property as exempt on Schedule C |
|--|---|--|
| Creditor's Chase Mortgage  | ■ Surrender the property.   | □ No   |
| name:  Description of 527 Cottonwood Lane property Schaumburg, IL 60193 Cook | <ul> <li>Retain the property and redeem it.</li> <li>Retain the property and enter into a Reaffirmation Agreement.</li> <li>Retain the property and [explain]:</li> </ul> | ■ Yes  |
| securing debt: County  |   |  |
| Creditor's Toyota Motor Credit name:   | <ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>  | □ No   |
| Description of 2016 Lexus RX 350 55,000 miles property securing debt:        | <ul><li>Retain the property and enter into a<br/>Reaffirmation Agreement.</li><li>Retain the property and [explain]:</li></ul>  | ■ Yes  |

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

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|     | otor 1<br>otor 2    | Oleksiy Sichkar<br>Anna Mashkovich   | Case number (if known                                      | )                              |
|-----|---------------------|--|--|--------------------------------|
| Les | sor's n             | ame:   |  |                                |
|     | scription<br>perty: | n of leased  |  | ☐ Yes                          |
|     | sor's na            | ame:<br>n of leased  |  | □ No                           |
|     | perty:              |  |  | ☐ Yes                          |
|     | sor's na            | ame:<br>n of leased  |  | □ No                           |
|     | perty:              |  |  | ☐ Yes                          |
|     | sor's n             | ame:<br>n of leased  |  | □ No                           |
|     | perty:              | 101104004  |  | ☐ Yes                          |
|     | sor's n             | ame:<br>n of leased  |  | □ No                           |
|     | perty:              | Turieaseu  |  | ☐ Yes                          |
|     | sor's n             |  |  | □ No                           |
|     | perty:              | n of leased  |  | □ Yes                          |
|     | sor's na            | ame:<br>n of leased  |  | □ No                           |
|     | perty:              | 101104004  |  | ☐ Yes                          |
| Par | t 3:                | Sign Below   |  |                                |
|     |                     | alty of perjury, I declare that I have indinated in the same indinated is subject to an unexpired lease. | cated my intention about any property of my estate that se | ecures a debt and any personal |
| Χ   |                     | leksiy Sichkar   | X _/s/ Anna Mashkovich                                     |                                |
|     |                     | siy Sichkar<br>ature of Debtor 1   | Anna Mashkovich Signature of Debtor 2                      |                                |
|     | Date                | October 31, 2017   | Date October 31, 2017                                      |                                |
|     |                     |  |  |                                |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee
 \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-33692 Doc 1 Filed 11/09/17 Entered 11/09/17 20:33:32 Desc Main Document Page 47 of 56

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In re  | Oleksiy Sichkar<br>Anna Mashkovich  |   | Case No.                                       |                                     |  |
|--------|---|---|--|-------------------------------------|--|
|        | 7 ma macinio vicin  | Debtor(s)   | Chapter  | 7                                   |  |
|        | DISCLOSURE OF COMPE   | NSATION OF ATTO   | RNEY FOR DE                                    | CBTOR(S)                            |  |
| c      | tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of   | ng of the petition in bankruptcy.   | , or agreed to be paid                         | to me, for services rendered or to  |  |
|        | For legal services, I have agreed to accept   |   | \$   | 0.00                                |  |
|        | Prior to the filing of this statement I have received   |   | \$   | 0.00                                |  |
|        | Balance Due   |   | \$   | 0.00                                |  |
| 2. \$  | <b>0.00</b> of the filing fee has been paid.  |   |  |                                     |  |
| 3. T   | The source of the compensation paid to me was:  |   |  |                                     |  |
|        | ■ Debtor □ Other (specify):   |   |  |                                     |  |
| 4. Т   | The source of compensation to be paid to me is:   |   |  |                                     |  |
|        | ■ Debtor □ Other (specify):   |   |  |                                     |  |
| 5. I   | I have not agreed to share the above-disclosed comp   | ensation with any other person  | unless they are members                        | pers and associates of my law firm. |  |
| I      | ☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name   |   |  |                                     |  |
| 5. I   | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:   |   |  |                                     |  |
| b<br>c | <ul> <li>Analysis of the debtor's financial situation, and rende</li> <li>Preparation and filing of any petition, schedules, stat</li> <li>Representation of the debtor at the meeting of credite</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and application</li> </ul> | ement of affairs and plan which<br>ors and confirmation hearing, an<br>educe to market value; exc                 | n may be required;<br>nd any adjourned hea     | rings thereof;                      |  |
| 7. E   | By agreement with the debtor(s), the above-disclosed fer<br>Representation of the debtors in any dis<br>any other adversary proceeding; prepar<br>of liens on household goods.  | schargeability actions, judi  | icial lien avoidance                           |                                     |  |
|        |   | CERTIFICATION   |  |                                     |  |
|        | certify that the foregoing is a complete statement of an unkruptcy proceeding.  | y agreement or arrangement for  | r payment to me for re                         | epresentation of the debtor(s) in   |  |
|        | ctober 31, 2017  ate  | Alexey Y. Kaplan<br>Signature of Attorne<br>Kaplan Law Offic<br>3400 Dundee Ros<br>Suite 150<br>Northbrook, IL 60 | ces, P.C.<br>ad<br>0062<br>Fax: (847) 272-8779 | ces, P.C.) 6272494                  |  |

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### United States Bankruptcy Court Northern District of Illinois

| In re | Oleksiy Sichkar<br>Anna Mashkovich           |   | Case No.        |                           |
|-------|--|---|-----------------|---------------------------|
|       |  | Debtor(s)   | Chapter         | 7                         |
|       |  |   |                 |                           |
|       | VER  | RIFICATION OF CREDITOR M                                | ATRIX           |                           |
|       |  | Number of   | Creditors: _    | 21                        |
|       | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credit                 | ors is true and | correct to the best of my |
| Date: | October 31, 2017                             | /s/ Oleksiy Sichkar Oleksiy Sichkar Signature of Debtor |                 |                           |
| Date: | October 31, 2017                             | /s/ Anna Mashkovich                                     |                 |                           |
|       |  | Anna Mashkovich   |                 |                           |
|       |  | Signature of Debtor                                     |                 |                           |

Alexian Brothers Medical Center 800 Biesterfield Road Elk Grove Village, IL 60007

Carson's PO Box 659813 San Antonio, TX 78265-9113

Chase Card Services Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chase Mortgage 3415 Vision Dr Columbus, OH 43219

Citibank/Best Buy Citicorp/Centralized Bankruptcy Po Box 790040 Saint Louis, MO 63179

Codilis & Associates, PC 15W030 North Frontage Rd., Ste. 100 Burr Ridge, IL 60527

Codilis & Associates, PC 15W030 North Frontage Rd., Ste. 100 Burr Ridge, IL 60527

Discover Financial Po Box 3025 New Albany, OH 43054

Dyck Oneal Inc 6060 N Central Expy Ste Dallas, TX 75206

Elan Financial Service Po Box 108 Saint Louis, MO 63166 Fannie Mae c/o Johnson Blumberg Assoc. 230 W. Monroe, Unit 1125 Chicago, IL 60606

GC Services Limited Partnership PO Box 930824 Wixom, MI 48393-0824

Kohl's Payment Center PO Box 2983 Milwaukee, WI 53201-2983

Merchants & Medical 6324 Taylor Drive Flint, MI 48507-4685

Merchants Credit 223 W Jackson Blvd Ste 700 Chicago, IL 60606

Sears Credit Cards PO Box 78051 Phoenix, AZ 85062-8051

Seterus, Inc. PO Box 54420 Los Angeles, CA 90054-0420

St. Alexius Medical Center 1555 Barrington Road Hoffman Estates, IL 60169

TJX Rewards/SYNCB PO Box 530948 Atlanta, GA 30353-0948

Toyota Motor Credit 1111 W 22nd St Ste 420 Oak Brook, IL 60523 Toyota Motor Credit 1111 W. 22nd Street Suite 420 Oak Brook, IL 60523 Case 17-33692 Doc 1 Filed 11/09/17 Entered 11/09/17 20:33:32 Desc Main Document Page 52 of 56

### United States Bankruptcy Court Northern District of Illinois

| In re | Oleksiy Sichkar<br><sup>1 re</sup> Anna Mashkovich |           | Case No. |   |
|-------|--|-----------|----------|---|
|       |  | Debtor(s) | Chapter  | 7 |

|                                 | <b>BUSINESS INCO</b>                   | OME AND EXPI                   | ENSES          |                             |                  |
|---------------------------------|--|--------------------------------|----------------|-----------------------------|------------------|
| FINANCIAL REVIEW O              | F THE DEBTOR'S BUSINESS                | NOTE: ONLY INCLUDE             | information di | irectly related to the busi | ness operation.) |
| PART A - GROSS BUSINESS         | INCOME FOR PREVIOUS 12                 | 2 MONTHS:                      |                |                             |                  |
| 1. Gross Income For 12 Month    | ns Prior to Filing:                    |                                | \$             | 154,018.00                  |                  |
| PART B - ESTIMATED AVER         | RAGE FUTURE GROSS MON                  | THLY INCOME:                   |                |                             |                  |
| 2. Gross Monthly Income         |  |                                |                | \$                          | 12,835.00        |
| PART C - ESTIMATED FUTU         | RE MONTHLY EXPENSES:                   |                                |                |                             |                  |
| 3. Net Employee Payroll (Other  | er Than Debtor)                        |                                | \$             | 0.00                        |                  |
| 4. Payroll Taxes                |  |                                | ·              | 0.00                        |                  |
| 5. Unemployment Taxes           |  |                                |                | 0.00                        |                  |
| 6. Worker's Compensation        |  |                                | ·              | 0.00                        |                  |
| 7. Other Taxes                  |  |                                |                | 0.00                        |                  |
| 8. Inventory Purchases (Include | ling raw materials)                    |                                | ·              | 0.00                        |                  |
| 9. Purchase of Feed/Fertilizer/ | Seed/Spray                             |                                |                | 0.00                        |                  |
| 10. Rent (Other than debtor's p | principal residence)                   |                                |                | 0.00                        |                  |
| 11. Utilities                   |  |                                |                | 0.00                        |                  |
| 12. Office Expenses and Supp    | lies                                   |                                |                | 0.00                        |                  |
| 13. Repairs and Maintenance     |  |                                |                | 0.00                        |                  |
| 14. Vehicle Expenses            |  |                                |                | 0.00                        |                  |
| 15. Travel and Entertainment    |  |                                |                | 0.00                        |                  |
| 16. Equipment Rental and Lea    | ses                                    |                                |                | 0.00                        |                  |
| 17. Legal/Accounting/Other P    | rofessional Fees                       |                                |                | 0.00                        |                  |
| 18. Insurance                   |  |                                |                | 0.00                        |                  |
| 19. Employee Benefits (e.g., p  | ension, medical, etc.)                 |                                |                | 0.00                        |                  |
| 20. Payments to Be Made Dire    | ectly By Debtor to Secured Creditors F | or Pre-Petition Business Debts | (Specify):     |                             |                  |
| DESCRIPTION                     |  | TOTA                           | Ţ              |                             |                  |
| Repairs & mainte                | nance                                  | 1,630.                         |                |                             |                  |
| Taxes & licenses                |  | 568.00                         |                |                             |                  |
| Accounting                      |  | 101.00                         |                |                             |                  |
| Auto & truck exp                |  | 235.00                         | )              |                             |                  |
| Computer service<br>Insurance   | es & supplies                          | 93.00<br>297.00                | `              |                             |                  |
| Meals & entertair               | ment                                   | 1,250.                         |                |                             |                  |
| Office expenses                 |  | 20.00                          | 00             |                             |                  |
| Parking fees & to               | lls                                    | 320.00                         | )              |                             |                  |
| Supplies                        |  | 67.00                          |                |                             |                  |
| Telephone                       |  | 166.00                         | )              |                             |                  |
| Small hand tools                |  | 42.00                          |                |                             |                  |
| Travel                          | tive elething                          | 14.00<br>42.00                 |                |                             |                  |
| Uniform & protec<br>Fuel        | tive clothing                          | 42.00<br>3,587.                | 00             |                             |                  |
| Towing                          |  | 37.00                          | 00             |                             |                  |
| 21. Other (Specify):            |  |                                |                |                             |                  |
| DESCRIPTION                     |  | TOTA                           | L              |                             |                  |
|                                 |  |                                |                |                             |                  |

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| PART D - | ESTIMATED | AVERAGE NET N | MONTHLY INCOME: |
|----------|-----------|---------------|-----------------|

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2)

\$ \_\_\_\_\_4,366.00

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### STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. §341

### INTRODUCTION

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Trustee, United States Department of Justice, has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of...

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This information sheet contains only general principles of law and is not a substitute for legal advice. If you have questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

### WHAT IS A DISCHARGE?

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed on your bankruptcy schedules. A discharge is a court order that says you do not have to repay your debts, but there are a number of exceptions. Debts which may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to pay any debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

### WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying any debts that were not listed on your bankruptcy schedules or that you incurred after you filed for bankruptcy.

### WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?

After you file your petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document, which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court within 60 days after the first meeting of the creditors.

Reaffirmation agreements are strictly voluntary — they are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues your discharge order or within sixty (60) days after the reaffirmation agreement was filed with the court, whichever is later. If you reaffirm a debt and fail to make the payments required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any remaining debt.

### OTHER BANKRUPTCY OPTIONS

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtor's farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtor must pay the chapter 13 trustee the amounts set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,347,500 (\$336,900 in unsecured debts and \$1,010,650 in secured debts).

## AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

| /s/ Oleksiy Sichkar | October 31, 2017 | /s/ Anna Mashkovich      | October 31, 2017 |
|---------------------|------------------|--------------------------|------------------|
| Debtor's Signature  | Date             | Joint Debtor's Signature | Date             |

### 11 U.S.C. § 527(a)(2) Disclosure

In accordance with section 527(a)(2) of the Bankruptcy Code, be advised that:

- 1. All information that you are required to provide with a bankruptcy petition and during a bankruptcy case must be complete, accurate, and truthful.
- 2. All assets and liabilities must be completely and accurately disclosed, with the replacement value of each asset as defined in section 506 listed after reasonable inquiry to establish such value.
- 3. Current monthly income, the amounts specified in the "means test" under section 707(b)(2), and disposable income in chapter 13 cases must be stated after reasonable inquiry.
- 4. Information that you provide during your bankruptcy case may be audited, and the failure to provide such information may result in dismissal of the case or other sanction, including a criminal sanction.

# IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER.

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules, and Statement of Financial Affairs, and in some cases a Statement of Intention, need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a 'trustee' and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.